



Rep. Angelo Saviano

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09500SB0360ham001

LRB095 06827 RAS 37257 a

1 AMENDMENT TO SENATE BILL 360

2 AMENDMENT NO. _____. Amend Senate Bill 360 by replacing
3 everything after the enacting clause with the following:

4 "Section 5. The Regulatory Sunset Act is amended by
5 changing Section 4.18 and by adding Section 4.28 as follows:

6 (5 ILCS 80/4.18)

7 Sec. 4.18. Acts repealed January 1, 2008 and December 31,
8 2008.

9 (a) The following Acts are repealed on January 1, 2008:

10 The Acupuncture Practice Act.

11 The Clinical Social Work and Social Work Practice Act.

12 The Home Medical Equipment and Services Provider
13 License Act.

14 ~~The Nursing and Advanced Practice Nursing Act.~~

15 The Illinois Speech-Language Pathology and Audiology
16 Practice Act.

1 The Marriage and Family Therapy Licensing Act.

2 The Nursing Home Administrators Licensing and
3 Disciplinary Act.

4 The Pharmacy Practice Act of 1987.

5 The Physician Assistant Practice Act of 1987.

6 The Podiatric Medical Practice Act of 1987.

7 The Structural Pest Control Act.

8 (b) The following Acts are repealed on December 31, 2008:

9 The Medical Practice Act of 1987.

10 The Environmental Health Practitioner Licensing Act.

11 (Source: P.A. 94-754, eff. 5-10-06; 94-1075, eff. 12-29-06;

12 94-1085, eff. 1-19-07; revised 1-22-07.)

13 (5 ILCS 80/4.28 new)

14 Sec. 4.28. Act repealed on January 1, 2018. The following
15 Act is repealed on January 1, 2018:

16 The Nurse Practice Act.

17 Section 10. The Mental Health and Developmental
18 Disabilities Administrative Act is amended by changing Section
19 56 as follows:

20 (20 ILCS 1705/56) (from Ch. 91 1/2, par. 100-56)

21 Sec. 56. The Secretary, upon making a determination based
22 upon information in the possession of the Department, that
23 continuation in practice of a licensed health care professional

1 would constitute an immediate danger to the public, shall
2 submit a written communication to the Director of Professional
3 Regulation indicating such determination and additionally
4 providing a complete summary of the information upon which such
5 determination is based, and recommending that the Director of
6 Professional Regulation immediately suspend such person's
7 license. All relevant evidence, or copies thereof, in the
8 Department's possession may also be submitted in conjunction
9 with the written communication. A copy of such written
10 communication, which is exempt from the copying and inspection
11 provisions of the Freedom of Information Act, shall at the time
12 of submittal to the Director of Professional Regulation be
13 simultaneously mailed to the last known business address of
14 such licensed health care professional by certified or
15 registered postage, United States Mail, return receipt
16 requested. Any evidence, or copies thereof, which is submitted
17 in conjunction with the written communication is also exempt
18 from the copying and inspection provisions of the Freedom of
19 Information Act.

20 For the purposes of this Section, "licensed health care
21 professional" means any person licensed under the Illinois
22 Dental Practice Act, the Nurse Practice Act ~~Nursing and~~
23 ~~Advanced Practice Nursing Act~~, the Medical Practice Act of
24 1987, the Pharmacy Practice Act of 1987, the Podiatric Medical
25 Practice Act of 1987, and the Illinois Optometric Practice Act
26 of 1987.

1 (Source: P.A. 89-507, eff. 7-1-97; 90-742, eff. 8-13-98.)

2 Section 15. The Department of Public Health Powers and
3 Duties Law of the Civil Administrative Code of Illinois is
4 amended by changing Sections 2310-140 and 2310-210 as follows:

5 (20 ILCS 2310/2310-140) (was 20 ILCS 2310/55.37a)

6 Sec. 2310-140. Recommending suspension of licensed health
7 care professional. The Director, upon making a determination
8 based upon information in the possession of the Department that
9 continuation in practice of a licensed health care professional
10 would constitute an immediate danger to the public, shall
11 submit a written communication to the Director of Professional
12 Regulation indicating that determination and additionally (i)
13 providing a complete summary of the information upon which the
14 determination is based and (ii) recommending that the Director
15 of Professional Regulation immediately suspend the person's
16 license. All relevant evidence, or copies thereof, in the
17 Department's possession may also be submitted in conjunction
18 with the written communication. A copy of the written
19 communication, which is exempt from the copying and inspection
20 provisions of the Freedom of Information Act, shall at the time
21 of submittal to the Director of Professional Regulation be
22 simultaneously mailed to the last known business address of the
23 licensed health care professional by certified or registered
24 postage, United States Mail, return receipt requested. Any

1 evidence, or copies thereof, that is submitted in conjunction
2 with the written communication is also exempt from the copying
3 and inspection provisions of the Freedom of Information Act.

4 For the purposes of this Section, "licensed health care
5 professional" means any person licensed under the Illinois
6 Dental Practice Act, the Nurse Practice Act ~~Nursing and~~
7 ~~Advanced Practice Nursing Act~~, the Medical Practice Act of
8 1987, the Pharmacy Practice Act of 1987, the Podiatric Medical
9 Practice Act of 1987, or the Illinois Optometric Practice Act
10 of 1987.

11 (Source: P.A. 90-742, eff. 8-13-98; 91-239, eff. 1-1-00.)

12 (20 ILCS 2310/2310-210) (was 20 ILCS 2310/55.62a)

13 Sec. 2310-210. Advisory Panel on Minority Health.

14 (a) In this Section:

15 "Health profession" means any health profession regulated
16 under the laws of this State, including, without limitation,
17 professions regulated under the Illinois Athletic Trainers
18 Practice Act, the Clinical Psychologist Licensing Act, the
19 Clinical Social Work and Social Work Practice Act, the Illinois
20 Dental Practice Act, the Dietetic and Nutrition Services
21 Practice Act, the Marriage and Family Therapy Licensing Act,
22 the Medical Practice Act of 1987, the Naprapathic Practice Act,
23 the Nurse Practice Act ~~Nursing and Advanced Practice Nursing~~
24 ~~Act~~, the Illinois Occupational Therapy Practice Act, the
25 Illinois Optometric Practice Act of 1987, the Illinois Physical

1 Therapy Act, the Physician Assistant Practice Act of 1987, the
2 Podiatric Medical Practice Act of 1987, the Professional
3 Counselor and Clinical Professional Counselor Licensing Act,
4 and the Illinois Speech-Language Pathology and Audiology
5 Practice Act.

6 "Minority" has the same meaning as in Section 2310-215.

7 (b) The General Assembly finds as follows:

8 (1) The health status of individuals from ethnic and
9 racial minorities in this State is significantly lower than
10 the health status of the general population of the State.

11 (2) Minorities suffer disproportionately high rates of
12 cancer, stroke, heart disease, diabetes, sickle-cell
13 anemia, lupus, substance abuse, acquired immune deficiency
14 syndrome, other diseases and disorders, unintentional
15 injuries, and suicide.

16 (3) The incidence of infant mortality among minorities
17 is almost double that for the general population.

18 (4) Minorities suffer disproportionately from lack of
19 access to health care and poor living conditions.

20 (5) Minorities are under-represented in the health
21 care professions.

22 (6) Minority participation in the procurement policies
23 of the health care industry is lacking.

24 (7) Minority health professionals historically have
25 tended to practice in low-income areas and to serve
26 minorities.

1 (8) National experts on minority health report that
2 access to health care among minorities can be substantially
3 improved by increasing the number of minority health
4 professionals.

5 (9) Increasing the number of minorities serving on the
6 facilities of health professional schools is an important
7 factor in attracting minorities to pursue a career in
8 health professions.

9 (10) Retaining minority health professionals currently
10 practicing in this State and those receiving training and
11 education in this State is an important factor in
12 maintaining and increasing the number of minority health
13 professionals in Illinois.

14 (11) An Advisory Panel on Minority Health is necessary
15 to address the health issues affecting minorities in this
16 State.

17 (c) The General Assembly's intent is as follows:

18 (1) That all Illinoisans have access to health care.

19 (2) That the gap between the health status of
20 minorities and other Illinoisans be closed.

21 (3) That the health issues that disproportionately
22 affect minorities be addressed to improve the health status
23 of minorities.

24 (4) That the number of minorities in the health
25 professions be increased.

26 (d) The Advisory Panel on Minority Health is created. The

1 Advisory Panel shall consist of 25 members appointed by the
2 Director of Public Health. The members shall represent health
3 professions and the General Assembly.

4 (e) The Advisory Panel shall assist the Department in the
5 following manner:

6 (1) Examination of the following areas as they relate
7 to minority health:

8 (A) Access to health care.

9 (B) Demographic factors.

10 (C) Environmental factors.

11 (D) Financing of health care.

12 (E) Health behavior.

13 (F) Health knowledge.

14 (G) Utilization of quality care.

15 (H) Minorities in health care professions.

16 (2) Development of monitoring, tracking, and reporting
17 mechanisms for programs and services with minority health
18 goals and objectives.

19 (3) Communication with local health departments,
20 community-based organizations, voluntary health
21 organizations, and other public and private organizations
22 statewide, on an ongoing basis, to learn more about their
23 services to minority communities, the health problems of
24 minority communities, and their ideas for improving
25 minority health.

26 (4) Promotion of communication among all State

1 agencies that provide services to minority populations.

2 (5) Building coalitions between the State and
3 leadership in minority communities.

4 (6) Encouragement of recruitment and retention of
5 minority health professionals.

6 (7) Improvement in methods for collecting and
7 reporting data on minority health.

8 (8) Improvement in accessibility to health and medical
9 care for minority populations in under-served rural and
10 urban areas.

11 (9) Reduction of communication barriers for
12 non-English speaking residents.

13 (10) Coordination of the development and dissemination
14 of culturally appropriate and sensitive education
15 material, public awareness messages, and health promotion
16 programs for minorities.

17 (f) On or before January 1, 1997 the Advisory Panel shall
18 submit an interim report to the Governor and the General
19 Assembly. The interim report shall include an update on the
20 Advisory Panel's progress in performing its functions under
21 this Section and shall include recommendations, including
22 recommendations for any necessary legislative changes.

23 On or before January 1, 1998 the Advisory Panel shall
24 submit a final report to the Governor and the General Assembly.
25 The final report shall include the following:

26 (1) An evaluation of the health status of minorities in

1 this State.

2 (2) An evaluation of minority access to health care in
3 this State.

4 (3) Recommendations for improving the health status of
5 minorities in this State.

6 (4) Recommendations for increasing minority access to
7 health care in this State.

8 (5) Recommendations for increasing minority
9 participation in the procurement policies of the health
10 care industry.

11 (6) Recommendations for increasing the number of
12 minority health professionals in this State.

13 (7) Recommendations that will ensure that the health
14 status of minorities in this State continues to be
15 addressed beyond the expiration of the Advisory Panel.

16 (Source: P.A. 90-742, eff. 8-13-98; 91-239, eff. 1-1-00.)

17 Section 20. The Department of Veterans Affairs Act is
18 amended by changing Section 2.07 as follows:

19 (20 ILCS 2805/2.07) (from Ch. 126 1/2, par. 67.07)

20 Sec. 2.07. The Department shall employ and maintain
21 sufficient and qualified staff at the veterans' homes to
22 fulfill the requirements of this Act. The Department shall
23 report to the General Assembly, by January 1 and July 1 of each
24 year, the number of staff employed in providing direct patient

1 care at their veterans' homes, the compliance or noncompliance
2 with staffing standards established by the United States
3 Department of Veterans Affairs for such care, and in the event
4 of noncompliance with such standards, the number of staff
5 required for compliance. For purposes of this Section, a nurse
6 who has a license application pending with the State shall not
7 be deemed unqualified by the Department if the nurse is in
8 compliance with Section 50-15 of the Nurse Practice Act 225
9 ~~ILCS 65/5-15(g) or 225 ILCS 5-15(i) of the Nursing and Advanced~~
10 ~~Practice Nursing Act.~~

11 All contracts between the State and outside contractors to
12 provide workers to staff and service the Anna Veterans Home
13 shall be canceled in accordance with the terms of those
14 contracts. Upon cancellation, each worker or staff member shall
15 be offered certified employment status under the Illinois
16 Personnel Code with the State of Illinois. To the extent it is
17 reasonably practicable, the position offered to each person
18 shall be at the same facility and shall consist of the same
19 duties and hours as previously existed under the canceled
20 contract or contracts.

21 (Source: P.A. 93-597, eff. 8-26-03; 94-703, eff. 6-1-06;
22 revised 9-15-06.)

23 Section 25. The Geriatric Medicine Assistance Act is
24 amended by changing Section 2 as follows:

1 (20 ILCS 3945/2) (from Ch. 144, par. 2002)

2 Sec. 2. There is created the Geriatric Medicine Assistance
3 Commission. The Commission shall receive and approve
4 applications for grants from schools, recognized by the
5 Department of Professional Regulation as being authorized to
6 confer doctor of medicine, doctor of osteopathy, doctor of
7 chiropractic or registered professional nursing degrees in the
8 State, to help finance the establishment of geriatric medicine
9 programs within such schools. In determining eligibility for
10 grants, the Commission shall give preference to those programs
11 which exhibit the greatest potential for directly benefiting
12 the largest number of elderly citizens in the State. The
13 Commission may not approve the application of any institution
14 which is unable to demonstrate its current financial stability
15 and reasonable prospects for future stability. No institution
16 which fails to possess and maintain an open policy with respect
17 to race, creed, color and sex as to admission of students,
18 appointment of faculty and employment of staff shall be
19 eligible for grants under this Act. The Commission shall
20 establish such rules and standards as it deems necessary for
21 the implementation of this Act.

22 The Commission shall be composed of 8 members selected as
23 follows: 2 physicians licensed to practice under the Medical
24 Practice Act of 1987 and specializing in geriatric medicine; a
25 registered professional nurse licensed under the Nurse
26 Practice Act ~~Nursing and Advanced Practice Nursing Act~~ and

1 specializing in geriatric health care; 2 representatives of
2 organizations interested in geriatric medicine or the care of
3 the elderly; and 3 individuals 60 or older who are interested
4 in geriatric health care or the care of the elderly. The
5 members of the Commission shall be selected by the Governor
6 from a list of recommendations submitted to him by
7 organizations concerned with geriatric medicine or the care of
8 the elderly.

9 The terms of the members of the Commission shall be 4
10 years, except that of the members initially appointed, 2 shall
11 be designated to serve until January 1, 1986, 3 until January
12 1, 1988, and 2 until January 1, 1990. Members of the Commission
13 shall receive no compensation, but shall be reimbursed for
14 actual expenses incurred in carrying out their duties.

15 (Source: P.A. 90-742, eff. 8-13-98.)

16 Section 30. The State Finance Act is amended by changing
17 Section 8h as follows:

18 (30 ILCS 105/8h)

19 Sec. 8h. Transfers to General Revenue Fund.

20 (a) Except as otherwise provided in this Section and
21 Section 8n of this Act, and ~~(c), (d), or (e)~~, notwithstanding
22 any other State law to the contrary, the Governor may, through
23 June 30, 2007, from time to time direct the State Treasurer and
24 Comptroller to transfer a specified sum from any fund held by

1 the State Treasurer to the General Revenue Fund in order to
2 help defray the State's operating costs for the fiscal year.
3 The total transfer under this Section from any fund in any
4 fiscal year shall not exceed the lesser of (i) 8% of the
5 revenues to be deposited into the fund during that fiscal year
6 or (ii) an amount that leaves a remaining fund balance of 25%
7 of the July 1 fund balance of that fiscal year. In fiscal year
8 2005 only, prior to calculating the July 1, 2004 final
9 balances, the Governor may calculate and direct the State
10 Treasurer with the Comptroller to transfer additional amounts
11 determined by applying the formula authorized in Public Act
12 93-839 to the funds balances on July 1, 2003. No transfer may
13 be made from a fund under this Section that would have the
14 effect of reducing the available balance in the fund to an
15 amount less than the amount remaining unexpended and unreserved
16 from the total appropriation from that fund estimated to be
17 expended for that fiscal year. This Section does not apply to
18 any funds that are restricted by federal law to a specific use,
19 to any funds in the Motor Fuel Tax Fund, the Intercity
20 Passenger Rail Fund, the Hospital Provider Fund, the Medicaid
21 Provider Relief Fund, the Teacher Health Insurance Security
22 Fund, the Reviewing Court Alternative Dispute Resolution Fund,
23 the Voters' Guide Fund, the Foreign Language Interpreter Fund,
24 the Lawyers' Assistance Program Fund, the Supreme Court Federal
25 Projects Fund, the Supreme Court Special State Projects Fund,
26 the Supplemental Low-Income Energy Assistance Fund, the Good

1 Samaritan Energy Trust Fund, the Low-Level Radioactive Waste
2 Facility Development and Operation Fund, the Horse Racing
3 Equity Trust Fund, or the Hospital Basic Services Preservation
4 Fund, or to any funds to which Section 70-50 of the Nurse
5 Practice Act ~~subsection (f) of Section 20-40 of the Nursing and~~
6 ~~Advanced Practice Nursing Act~~ applies. No transfers may be made
7 under this Section from the Pet Population Control Fund.
8 Notwithstanding any other provision of this Section, for fiscal
9 year 2004, the total transfer under this Section from the Road
10 Fund or the State Construction Account Fund shall not exceed
11 the lesser of (i) 5% of the revenues to be deposited into the
12 fund during that fiscal year or (ii) 25% of the beginning
13 balance in the fund. For fiscal year 2005 through fiscal year
14 2007, no amounts may be transferred under this Section from the
15 Road Fund, the State Construction Account Fund, the Criminal
16 Justice Information Systems Trust Fund, the Wireless Service
17 Emergency Fund, or the Mandatory Arbitration Fund.

18 In determining the available balance in a fund, the
19 Governor may include receipts, transfers into the fund, and
20 other resources anticipated to be available in the fund in that
21 fiscal year.

22 The State Treasurer and Comptroller shall transfer the
23 amounts designated under this Section as soon as may be
24 practicable after receiving the direction to transfer from the
25 Governor.

26 (a-5) Transfers directed to be made under this Section on

1 or before February 28, 2006 that are still pending on May 19,
2 2006 (the effective date of Public Act 94-774) ~~this amendatory~~
3 ~~Act of the 94th General Assembly~~ shall be redirected as
4 provided in Section 8n of this Act.

5 (b) This Section does not apply to: (i) the Ticket For The
6 Cure Fund; (ii) any fund established under the Community Senior
7 Services and Resources Act; or (iii) on or after January 1,
8 2006 (the effective date of Public Act 94-511), the Child Labor
9 and Day and Temporary Labor Enforcement Fund.

10 (c) This Section does not apply to the Demutualization
11 Trust Fund established under the Uniform Disposition of
12 Unclaimed Property Act.

13 (d) This Section does not apply to moneys set aside in the
14 Illinois State Podiatric Disciplinary Fund for podiatric
15 scholarships and residency programs under the Podiatric
16 Scholarship and Residency Act.

17 (e) Subsection (a) does not apply to, and no transfer may
18 be made under this Section from, the Pension Stabilization
19 Fund.

20 (Source: P.A. 93-32, eff. 6-20-03; 93-659, eff. 2-3-04; 93-674,
21 eff. 6-10-04; 93-714, eff. 7-12-04; 93-801, eff. 7-22-04;
22 93-839, eff. 7-30-04; 93-1054, eff. 11-18-04; 93-1067, eff.
23 1-15-05; 94-91, eff. 7-1-05; 94-120, eff. 7-6-05; 94-511, eff.
24 1-1-06; 94-535, eff. 8-10-05; 94-639, eff. 8-22-05; 94-645,
25 eff. 8-22-05; 94-648, eff. 1-1-06; 94-686, eff. 11-2-05;
26 94-691, eff. 11-2-05; 94-726, eff. 1-20-06; 94-773, eff.

1 5-18-06; 94-774, eff. 5-19-06; 94-804, eff. 5-26-06; 94-839,
2 eff. 6-6-06; revised 6-19-06.)

3 Section 40. The Nurse Educator Assistance Act is amended by
4 changing Section 5-15 as follows:

5 (110 ILCS 967/5-15)

6 Sec. 5-15. Definitions. In this Act:

7 "Approved program of professional nursing education" and
8 "approved program of practical nursing education" mean
9 programs of professional or practical nursing, respectively,
10 approved by the Department of Financial and Professional
11 Regulation under the provisions of the Nurse Practice Act
12 ~~Nursing and Advanced Practice Nursing Act.~~

13 "Commission" means the Illinois Student Assistance
14 Commission.

15 (Source: P.A. 94-1020, eff. 7-11-06.)

16 Section 45. The Nursing Education Scholarship Law is
17 amended by changing Section 3 as follows:

18 (110 ILCS 975/3) (from Ch. 144, par. 2753)

19 Sec. 3. Definitions.

20 The following terms, whenever used or referred to, have the
21 following meanings except where the context clearly indicates
22 otherwise:

1 (1) "Board" means the Board of Higher Education created by
2 the Board of Higher Education Act.

3 (2) "Department" means the Illinois Department of Public
4 Health.

5 (3) "Approved institution" means a public community
6 college, private junior college, hospital-based diploma in
7 nursing program, or public or private college or university
8 located in this State that has approval by the Department of
9 Professional Regulation for an associate degree in nursing
10 program, associate degree in applied sciences in nursing
11 program, hospital-based diploma in nursing program,
12 baccalaureate degree in nursing program, graduate degree in
13 nursing program, or certificate in practical nursing program.

14 (4) "Baccalaureate degree in nursing program" means a
15 program offered by an approved institution and leading to a
16 bachelor of science degree in nursing.

17 (5) "Enrollment" means the establishment and maintenance
18 of an individual's status as a student in an approved
19 institution, regardless of the terms used at the institution to
20 describe such status.

21 (6) "Academic year" means the period of time from September
22 1 of one year through August 31 of the next year or as
23 otherwise defined by the academic institution.

24 (7) "Associate degree in nursing program or hospital-based
25 diploma in nursing program" means a program offered by an
26 approved institution and leading to an associate degree in

1 nursing, associate degree in applied sciences in nursing, or
2 hospital-based diploma in nursing.

3 (8) "Graduate degree in nursing program" means a program
4 offered by an approved institution and leading to a master of
5 science degree in nursing or a doctorate of philosophy or
6 doctorate of nursing degree in nursing.

7 (9) "Director" means the Director of the Illinois
8 Department of Public Health.

9 (10) "Accepted for admission" means a student has completed
10 the requirements for entry into an associate degree in nursing
11 program, associate degree in applied sciences in nursing
12 program, hospital-based diploma in nursing program,
13 baccalaureate degree in nursing program, graduate degree in
14 nursing program, or certificate in practical nursing program at
15 an approved institution, as documented by the institution.

16 (11) "Fees" means those mandatory charges, in addition to
17 tuition, that all enrolled students must pay, including
18 required course or lab fees.

19 (12) "Full-time student" means a student enrolled for at
20 least 12 hours per term or as otherwise determined by the
21 academic institution.

22 (13) "Law" means the Nursing Education Scholarship Law.

23 (14) "Nursing employment obligation" means employment in
24 this State as a registered professional nurse or licensed
25 practical nurse in direct patient care or as a nurse educator
26 in the case of a graduate degree in nursing program recipient

1 for at least one year for each year of scholarship assistance
2 received through the Nursing Education Scholarship Program.

3 (15) "Part-time student" means a person who is enrolled for
4 at least one-third of the number of hours required per term by
5 a school for its full-time students.

6 (16) "Practical nursing program" means a program offered by
7 an approved institution leading to a certificate in practical
8 nursing.

9 (17) "Registered professional nurse" means a person who is
10 currently licensed as a registered professional nurse by the
11 Department of Professional Regulation under the Nurse Practice
12 Act ~~Nursing and Advanced Practice Nursing Act.~~

13 (18) "Licensed practical nurse" means a person who is
14 currently licensed as a licensed practical nurse by the
15 Department of Professional Regulation under the Nurse Practice
16 Act ~~Nursing and Advanced Practice Nursing Act.~~

17 (19) "School term" means an academic term, such as a
18 semester, quarter, trimester, or number of clock hours, as
19 defined by an approved institution.

20 (20) "Student in good standing" means a student maintaining
21 a cumulative grade point average equivalent to at least the
22 academic grade of a "C".

23 (21) "Total and permanent disability" means a physical or
24 mental impairment, disease, or loss of a permanent nature that
25 prevents nursing employment with or without reasonable
26 accommodation. Proof of disability shall be a declaration from

1 the social security administration, Illinois Workers'
2 Compensation Commission, Department of Defense, or an insurer
3 authorized to transact business in Illinois who is providing
4 disability insurance coverage to a contractor.

5 (22) "Tuition" means the established charges of an
6 institution of higher learning for instruction at that
7 institution.

8 (23) "Nurse educator" means a person who is currently
9 licensed as a registered nurse by the Department of
10 Professional Regulation under the Nurse Practice Act ~~Nursing
11 and Advanced Practice Nursing Act~~, who has a graduate degree in
12 nursing, and who is employed by an approved academic
13 institution to educate registered nursing students, licensed
14 practical nursing students, and registered nurses pursuing
15 graduate degrees.

16 (Source: P.A. 92-43, eff. 1-1-02; 93-721, eff. 1-1-05; 93-879,
17 eff. 1-1-05; revised 10-25-04.)

18 Section 50. The Academic Degree Act is amended by changing
19 Section 11 as follows:

20 (110 ILCS 1010/11) (from Ch. 144, par. 241)

21 Sec. 11. Exemptions. This Act shall not apply to any school
22 or educational institution regulated or approved under the
23 Nurse Practice Act ~~Nursing and Advanced Practice Nursing Act~~.

24 This Act shall not apply to any of the following:

1 (a) in-training programs by corporations or other business
2 organizations for the training of their personnel;

3 (b) education or other improvement programs by business,
4 trade and similar organizations and associations for the
5 benefit of their members only; or

6 (c) apprentice or other training programs by labor unions.
7 (Source: P.A. 90-742, eff. 8-13-98.)

8 Section 55. The Ambulatory Surgical Treatment Center Act is
9 amended by changing Section 6.5 as follows:

10 (210 ILCS 5/6.5)

11 Sec. 6.5. Clinical privileges; advanced practice nurses.
12 All ambulatory surgical treatment centers (ASTC) licensed
13 under this Act shall comply with the following requirements:

14 (1) No ASTC policy, rule, regulation, or practice shall be
15 inconsistent with the provision of adequate collaboration and
16 consultation, ~~including medical direction of licensed advanced~~
17 ~~practice nurses~~, in accordance with Section 54.5 of the Medical
18 Practice Act of 1987.

19 (2) Operative surgical procedures shall be performed only
20 by a physician licensed to practice medicine in all its
21 branches under the Medical Practice Act of 1987, a dentist
22 licensed under the Illinois Dental Practice Act, or a
23 podiatrist licensed under the Podiatric Medical Practice Act of
24 1987, with medical staff membership and surgical clinical

1 privileges granted by the consulting committee of the ASTC. A
2 licensed physician, dentist, or podiatrist may be assisted by a
3 physician licensed to practice medicine in all its branches,
4 dentist, dental assistant, podiatrist, licensed advanced
5 practice nurse, licensed physician assistant, licensed
6 registered nurse, licensed practical nurse, surgical
7 assistant, surgical technician, or other individuals granted
8 clinical privileges to assist in surgery by the consulting
9 committee of the ASTC. Payment for services rendered by an
10 assistant in surgery who is not an ambulatory surgical
11 treatment center employee shall be paid at the appropriate
12 non-physician modifier rate if the payor would have made
13 payment had the same services been provided by a physician.

14 (2.5) A registered nurse licensed under the Nurse Practice
15 Act ~~Nursing and Advanced Practice Nursing Act~~ and qualified by
16 training and experience in operating room nursing shall be
17 present in the operating room and function as the circulating
18 nurse during all invasive or operative procedures. For purposes
19 of this paragraph (2.5), "circulating nurse" means a registered
20 nurse who is responsible for coordinating all nursing care,
21 patient safety needs, and the needs of the surgical team in the
22 operating room during an invasive or operative procedure.

23 (3) An advanced practice nurse is not required to possess
24 prescriptive authority or a written collaborative agreement
25 meeting the requirements of the Nurse Practice Act to provide
26 advanced practice nursing services in an ambulatory surgical

1 treatment center. An advanced practice nurse must possess
2 clinical privileges granted by the consulting medical staff
3 committee and ambulatory surgical treatment center in order to
4 provide services. Individual advanced practice nurses may also
5 be granted clinical privileges to order, select, and administer
6 medications, including controlled substances, to provide
7 delineated care. The attending physician must determine the
8 advance practice nurse's role in providing care for his or her
9 patients, except as otherwise provided in the consulting staff
10 policies. The consulting medical staff committee shall
11 periodically review the services of advanced practice nurses
12 granted privileges.

13 (4) ~~(3)~~ The anesthesia service shall be under the direction
14 of a physician licensed to practice medicine in all its
15 branches who has had specialized preparation or experience in
16 the area or who has completed a residency in anesthesiology. An
17 anesthesiologist, Board certified or Board eligible, is
18 recommended. Anesthesia services may only be administered
19 pursuant to the order of a physician licensed to practice
20 medicine in all its branches, licensed dentist, or licensed
21 podiatrist.

22 (A) The individuals who, with clinical privileges
23 granted by the medical staff and ASTC, may administer
24 anesthesia services are limited to the following:

25 (i) an anesthesiologist; or

26 (ii) a physician licensed to practice medicine in

1 all its branches; or

2 (iii) a dentist with authority to administer
3 anesthesia under Section 8.1 of the Illinois Dental
4 Practice Act; or

5 (iv) a licensed certified registered nurse
6 anesthetist.

7 (B) For anesthesia services, an anesthesiologist shall
8 participate through discussion of and agreement with the
9 anesthesia plan and shall remain physically present and be
10 available on the premises during the delivery of anesthesia
11 services for diagnosis, consultation, and treatment of
12 emergency medical conditions. In the absence of 24-hour
13 availability of anesthesiologists with clinical
14 privileges, an alternate policy (requiring participation,
15 presence, and availability of a physician licensed to
16 practice medicine in all its branches) shall be developed
17 by the medical staff consulting committee in consultation
18 with the anesthesia service and included in the medical
19 staff consulting committee policies.

20 (C) A certified registered nurse anesthetist is not
21 required to possess prescriptive authority or a written
22 collaborative agreement meeting the requirements of
23 Section 65-35 of the Nurse Practice Act ~~15-15 of the~~
24 ~~Nursing and Advanced Practice Nursing Act~~ to provide
25 anesthesia services ordered by a licensed physician,
26 dentist, or podiatrist. Licensed certified registered

1 nurse anesthetists are authorized to select, order, and
2 administer drugs and apply the appropriate medical devices
3 in the provision of anesthesia services under the
4 anesthesia plan agreed with by the anesthesiologist or, in
5 the absence of an available anesthesiologist with clinical
6 privileges, agreed with by the operating physician,
7 operating dentist, or operating podiatrist in accordance
8 with the medical staff consulting committee policies of a
9 licensed ambulatory surgical treatment center.

10 (Source: P.A. 93-352, eff. 1-1-04; 94-915, eff. 1-1-07.)

11 Section 60. The Illinois Clinical Laboratory and Blood Bank
12 Act is amended by changing Section 7-101 as follows:

13 (210 ILCS 25/7-101) (from Ch. 111 1/2, par. 627-101)

14 Sec. 7-101. Examination of specimens. A clinical
15 laboratory shall examine specimens only at the request of (i) a
16 licensed physician, (ii) a licensed dentist, (iii) a licensed
17 podiatrist, (iv) a therapeutic optometrist for diagnostic or
18 therapeutic purposes related to the use of diagnostic topical
19 or therapeutic ocular pharmaceutical agents, as defined in
20 subsections (c) and (d) of Section 15.1 of the Illinois
21 Optometric Practice Act of 1987, (v) a licensed physician
22 assistant in accordance with the written guidelines required
23 under subdivision (3) of Section 4 and under Section 7.5 of the
24 Physician Assistant Practice Act of 1987, (v-A) an advanced

1 practice nurse in accordance with the written collaborative
2 agreement required under Section 65-35 of the Nurse Practice
3 Act ~~15-15 of the Nursing and Advanced Practice Nursing Act~~, or
4 (vi) an authorized law enforcement agency or, in the case of
5 blood alcohol, at the request of the individual for whom the
6 test is to be performed in compliance with Sections 11-501 and
7 11-501.1 of the Illinois Vehicle Code. If the request to a
8 laboratory is oral, the physician or other authorized person
9 shall submit a written request to the laboratory within 48
10 hours. If the laboratory does not receive the written request
11 within that period, it shall note that fact in its records. For
12 purposes of this Section, a request made by electronic mail or
13 fax constitutes a written request.

14 (Source: P.A. 90-116, eff. 7-14-97; 90-322, eff. 1-1-98;
15 90-655, eff. 7-30-98; 90-666, eff. 7-30-98; 90-742, eff.
16 8-13-98; 91-357, eff. 7-29-99.)

17 Section 65. The Life Care Facilities Act is amended by
18 changing Section 2 as follows:

19 (210 ILCS 40/2) (from Ch. 111 1/2, par. 4160-2)

20 Sec. 2. As used in this Act, unless the context otherwise
21 requires:

22 (a) "Department" means the Department of Public Health.

23 (b) "Director" means the Director of the Department.

24 (c) "Life care contract" means a contract to provide to a

1 person for the duration of such person's life or for a term in
2 excess of one year, nursing services, medical services or
3 personal care services, in addition to maintenance services for
4 such person in a facility, conditioned upon the transfer of an
5 entrance fee to the provider of such services in addition to or
6 in lieu of the payment of regular periodic charges for the care
7 and services involved.

8 (d) "Provider" means a person who provides services
9 pursuant to a life care contract.

10 (e) "Resident" means a person who enters into a life care
11 contract with a provider, or who is designated in a life care
12 contract to be a person provided with maintenance and nursing,
13 medical or personal care services.

14 (f) "Facility" means a place or places in which a provider
15 undertakes to provide a resident with nursing services, medical
16 services or personal care services, in addition to maintenance
17 services for a term in excess of one year or for life pursuant
18 to a life care contract. The term also means a place or places
19 in which a provider undertakes to provide such services to a
20 non-resident.

21 (g) "Living unit" means an apartment, room or other area
22 within a facility set aside for the exclusive use of one or
23 more identified residents.

24 (h) "Entrance fee" means an initial or deferred transfer to
25 a provider of a sum of money or property, made or promised to
26 be made by a person entering into a life care contract, which

1 assures a resident of services pursuant to a life care
2 contract.

3 (i) "Permit" means a written authorization to enter into
4 life care contracts issued by the Department to a provider.

5 (j) "Medical services" means those services pertaining to
6 medical or dental care that are performed in behalf of patients
7 at the direction of a physician licensed under the Medical
8 Practice Act of 1987 or a dentist licensed under the Illinois
9 Dental Practice Act by such physicians or dentists, or by a
10 registered or licensed practical nurse as defined in the Nurse
11 Practice Act ~~Nursing and Advanced Practice Nursing Act~~ or by
12 other professional and technical personnel.

13 (k) "Nursing services" means those services pertaining to
14 the curative, restorative and preventive aspects of nursing
15 care that are performed at the direction of a physician
16 licensed under the Medical Practice Act of 1987 by or under the
17 supervision of a registered or licensed practical nurse as
18 defined in the Nurse Practice Act ~~Nursing and Advanced Practice~~
19 ~~Nursing Act~~.

20 (l) "Personal care services" means assistance with meals,
21 dressing, movement, bathing or other personal needs or
22 maintenance, or general supervision and oversight of the
23 physical and mental well-being of an individual, who is
24 incapable of maintaining a private, independent residence or
25 who is incapable of managing his person whether or not a
26 guardian has been appointed for such individual.

1 (m) "Maintenance services" means food, shelter and laundry
2 services.

3 (n) "Certificates of Need" means those permits issued
4 pursuant to the Illinois Health Facilities Planning Act as now
5 or hereafter amended.

6 (o) "Non-resident" means a person admitted to a facility
7 who has not entered into a life care contract.

8 (Source: P.A. 90-742, eff. 8-13-98.)

9 Section 70. The Nursing Home Care Act is amended by
10 changing Section 1-118 as follows:

11 (210 ILCS 45/1-118) (from Ch. 111 1/2, par. 4151-118)

12 Sec. 1-118. "Nurse" means a registered nurse or a licensed
13 practical nurse as defined in the Nurse Practice Act ~~Nursing~~
14 ~~and Advanced Practice Nursing Act.~~

15 (Source: P.A. 90-742, eff. 8-13-98.)

16 Section 75. The Emergency Medical Services (EMS) Systems
17 Act is amended by changing Section 3.80 as follows:

18 (210 ILCS 50/3.80)

19 Sec. 3.80. Pre-Hospital RN and Emergency Communications
20 Registered Nurse.

21 (a) Emergency Communications Registered Nurse or "ECRN"
22 means a registered professional nurse⁷ licensed under the Nurse

1 ~~Practice Act Nursing and Advanced Practice Nursing Act~~ who has
2 successfully completed supplemental education in accordance
3 with rules adopted by the Department, and who is approved by an
4 EMS Medical Director to monitor telecommunications from and
5 give voice orders to EMS System personnel, under the authority
6 of the EMS Medical Director and in accordance with System
7 protocols.

8 Upon the effective date of this amendatory Act of 1995, all
9 existing Registered Professional Nurse/MICNs shall be
10 considered ECRNs.

11 (b) "Pre-Hospital Registered Nurse" or "Pre-Hospital RN"
12 means a registered professional nurse, licensed under the Nurse
13 ~~Practice Act Nursing and Advanced Practice Nursing Act~~ who has
14 successfully completed supplemental education in accordance
15 with rules adopted by the Department pursuant to this Act, and
16 who is approved by an EMS Medical Director to practice within
17 an EMS System as emergency medical services personnel for
18 pre-hospital and inter-hospital emergency care and
19 non-emergency medical transports.

20 Upon the effective date of this amendatory Act of 1995, all
21 existing Registered Professional Nurse/Field RNs shall be
22 considered Pre-Hospital RNs.

23 (c) The Department shall have the authority and
24 responsibility to:

25 (1) Prescribe education and continuing education
26 requirements for Pre-Hospital RN and ECRN candidates

1 through rules adopted pursuant to this Act:

2 (A) Education for Pre-Hospital RN shall include
3 extrication, telecommunications, and pre-hospital
4 cardiac and trauma care;

5 (B) Education for ECRN shall include
6 telecommunications, System standing medical orders and
7 the procedures and protocols established by the EMS
8 Medical Director;

9 (C) A Pre-Hospital RN candidate who is fulfilling
10 clinical training and in-field supervised experience
11 requirements may perform prescribed procedures under
12 the direct supervision of a physician licensed to
13 practice medicine in all of its branches, a qualified
14 registered professional nurse or a qualified EMT, only
15 when authorized by the EMS Medical Director;

16 (D) An EMS Medical Director may impose in-field
17 supervised field experience requirements on System
18 ECRNs as part of their training or continuing
19 education, in which they perform prescribed procedures
20 under the direct supervision of a physician licensed to
21 practice medicine in all of its branches, a qualified
22 registered professional nurse or qualified EMT, only
23 when authorized by the EMS Medical Director;

24 (2) Require EMS Medical Directors to reapprove
25 Pre-Hospital RNs and ECRNs every 4 years, based on
26 compliance with continuing education requirements

1 prescribed by the Department through rules adopted
2 pursuant to this Act;

3 (3) Allow EMS Medical Directors to grant inactive
4 status to any Pre-Hospital RN or ECRN who qualifies, based
5 on standards and procedures established by the Department
6 in rules adopted pursuant to this Act;

7 (4) Require a Pre-Hospital RN to honor Do Not
8 Resuscitate (DNR) orders and powers of attorney for health
9 care only in accordance with rules adopted by the
10 Department pursuant to this Act and protocols of the EMS
11 System in which he or she practices.

12 (Source: P.A. 89-177, eff. 7-19-95; 90-742, eff. 8-13-98.)

13 Section 80. The Home Health, Home Services, and Home
14 Nursing Agency Licensing Act is amended by changing Section
15 2.09 as follows:

16 (210 ILCS 55/2.09)

17 Sec. 2.09. "Home services" or "in-home services" means
18 assistance with activities of daily living, housekeeping,
19 personal laundry, and companionship provided to an individual
20 in his or her personal residence, which are intended to enable
21 that individual to remain safely and comfortably in his or her
22 own personal residence. "Home services" or "in-home services"
23 does not include services that would be required to be
24 performed by an individual licensed under the Nurse Practice

1 ~~Act Nursing and Advanced Practice Nursing Act.~~

2 (Source: P.A. 94-379, eff. 1-1-06.)

3 Section 85. The Home Health, Home Services, and Home
4 Nursing Agency Licensing Act is amended by changing Section 6.3
5 as follows:

6 (210 ILCS 55/6.3)

7 Sec. 6.3. Home services agencies; standards; fees.

8 (a) Before January 1, 2008, the Department shall adopt
9 standards for the licensure and operation of home services
10 agencies operated in this State. The structure of the standards
11 shall be based on the concept of home services and its focus on
12 assistance with activities of daily living, housekeeping,
13 personal laundry, and companionship being provided to an
14 individual intended to enable that individual to remain safely
15 and comfortably in his or her own personal residence. As home
16 services do not include services that would be required to be
17 performed by an individual licensed under the Nurse Practice
18 ~~Act Nursing and Advanced Practice Nursing Act~~, the standards
19 shall be developed from a similar concept. After consideration
20 and recommendations by the Home Health and Home Services
21 Advisory Committee, the Department shall adopt such rules and
22 regulations as are necessary for the proper regulation of home
23 services agencies. Requirements for licensure as a home
24 services agency shall include the following:

1 (1) Compliance with the requirements of the Health Care
2 Worker Background Check Act.

3 (2) Notification, in a form and manner established by
4 the Department by rule, to home services workers and
5 consumers as to the party or parties responsible under
6 State and federal laws for payment of employment taxes,
7 social security taxes, and workers' compensation,
8 liability, the day-to-day supervision of workers, and the
9 hiring, firing, and discipline of workers with the
10 placement arrangement for home services.

11 (3) Compliance with rules, as adopted by the
12 Department, in regard to (i) reporting by the licensee of
13 any known or suspected incidences of abuse, neglect, or
14 financial exploitation of an eligible adult, as defined in
15 the Elder Abuse and Neglect Act, by a home services worker
16 employed by or placed by the licensee or (ii) reports to a
17 law enforcement agency in connection with any other
18 individual protected under the laws of the State of
19 Illinois.

20 (4) Compliance with rules, as adopted by the
21 Department, addressing the health, safety, and well-being
22 of clients receiving home services.

23 (b) The Department may establish fees for home services
24 agency licensure in rules in a manner that will make the
25 program self-supporting. The amount of the licensure fees shall
26 be based on the funding required for operation of the licensure

1 program.

2 (Source: P.A. 94-379, eff. 1-1-06.)

3 Section 90. The End Stage Renal Disease Facility Act is
4 amended by changing Section 5 as follows:

5 (210 ILCS 62/5)

6 Sec. 5. Definitions. As used in this Act:

7 "Committee" means the End Stage Renal Disease Advisory
8 Committee.

9 "Department" means the Department of Public Health.

10 "Dialysis" means a process by which dissolved substances
11 are removed from a patient's body by diffusion from one fluid
12 compartment to another across a semipermeable membrane.

13 "Dialysis technician" means an individual who is not a
14 registered nurse or physician and who provides dialysis care
15 under the supervision of a registered nurse or physician.

16 "Director" means the Director of Public Health.

17 "End stage renal disease" means that stage of renal
18 impairment that appears irreversible and permanent and that
19 requires a regular course of dialysis or kidney transplantation
20 to maintain life.

21 "End stage renal disease facility" or "ESRDF" means a
22 facility that provides dialysis treatment or dialysis training
23 to individuals with end stage renal disease.

24 "Licensee" means an individual or entity licensed by the

1 Department to operate an end stage renal disease facility.

2 "Nurse" means an individual who is licensed to practice
3 nursing under the Nurse Practice Act ~~Nursing and Advanced~~
4 ~~Practice Nursing Act~~.

5 "Patient" means any individual receiving treatment from an
6 end stage renal disease facility.

7 "Person" means any individual, firm, partnership,
8 corporation, company, association, or other legal entity.

9 "Physician" means an individual who is licensed to practice
10 medicine in all of its branches under the Medical Practice Act
11 of 1987.

12 (Source: P.A. 92-794, eff. 7-1-03.)

13 Section 95. The Hospital Licensing Act is amended by
14 changing Sections 10, 10.7, and 10.9 as follows:

15 (210 ILCS 85/10) (from Ch. 111 1/2, par. 151)

16 Sec. 10. Board creation; Department rules.

17 (a) The Governor shall appoint a Hospital Licensing Board
18 composed of 14 persons, which shall advise and consult with the
19 Director in the administration of this Act. The Secretary of
20 Human Services (or his or her designee) shall serve on the
21 Board, along with one additional representative of the
22 Department of Human Services to be designated by the Secretary.
23 Four appointive members shall represent the general public and
24 2 of these shall be members of hospital governing boards; one

1 appointive member shall be a registered professional nurse or
2 advanced practice, nurse as defined in the Nurse Practice Act
3 ~~Nursing and Advanced Practice Nursing Act~~, who is employed in a
4 hospital; 3 appointive members shall be hospital
5 administrators actively engaged in the supervision or
6 administration of hospitals; 2 appointive members shall be
7 practicing physicians, licensed in Illinois to practice
8 medicine in all of its branches; and one appointive member
9 shall be a physician licensed to practice podiatric medicine
10 under the Podiatric Medical Practice Act of 1987; and one
11 appointive member shall be a dentist licensed to practice
12 dentistry under the Illinois Dental Practice Act. In making
13 Board appointments, the Governor shall give consideration to
14 recommendations made through the Director by professional
15 organizations concerned with hospital administration for the
16 hospital administrative and governing board appointments,
17 registered professional nurse organizations for the registered
18 professional nurse appointment, professional medical
19 organizations for the physician appointments, and professional
20 dental organizations for the dentist appointment.

21 (b) Each appointive member shall hold office for a term of
22 3 years, except that any member appointed to fill a vacancy
23 occurring prior to the expiration of the term for which his
24 predecessor was appointed shall be appointed for the remainder
25 of such term and the terms of office of the members first
26 taking office shall expire, as designated at the time of

1 appointment, 2 at the end of the first year, 2 at the end of the
2 second year, and 3 at the end of the third year, after the date
3 of appointment. The initial terms of office of the 2 additional
4 members representing the general public provided for in this
5 Section shall expire at the end of the third year after the
6 date of appointment. The term of office of each original
7 appointee shall commence July 1, 1953; the term of office of
8 the original registered professional nurse appointee shall
9 commence July 1, 1969; the term of office of the original
10 licensed podiatrist appointee shall commence July 1, 1981; the
11 term of office of the original dentist appointee shall commence
12 July 1, 1987; and the term of office of each successor shall
13 commence on July 1 of the year in which his predecessor's term
14 expires. Board members, while serving on business of the Board,
15 shall receive actual and necessary travel and subsistence
16 expenses while so serving away from their places of residence.
17 The Board shall meet as frequently as the Director deems
18 necessary, but not less than once a year. Upon request of 5 or
19 more members, the Director shall call a meeting of the Board.

20 (c) The Director shall prescribe rules, regulations,
21 standards, and statements of policy needed to implement,
22 interpret, or make specific the provisions and purposes of this
23 Act. The Department shall adopt rules which set forth standards
24 for determining when the public interest, safety or welfare
25 requires emergency action in relation to termination of a
26 research program or experimental procedure conducted by a

1 hospital licensed under this Act. No rule, regulation, or
2 standard shall be adopted by the Department concerning the
3 operation of hospitals licensed under this Act which has not
4 had prior approval of the Hospital Licensing Board, nor shall
5 the Department adopt any rule, regulation or standard relating
6 to the establishment of a hospital without consultation with
7 the Hospital Licensing Board.

8 (d) Within one year after the effective date of this
9 amendatory Act of 1984, all hospitals licensed under this Act
10 and providing perinatal care shall comply with standards of
11 perinatal care promulgated by the Department. The Director
12 shall promulgate rules or regulations under this Act which are
13 consistent with "An Act relating to the prevention of
14 developmental disabilities", approved September 6, 1973, as
15 amended.

16 (Source: P.A. 89-507, eff. 7-1-97; 90-742, eff. 8-13-98.)

17 (210 ILCS 85/10.7)

18 Sec. 10.7. Clinical privileges; advanced practice nurses.
19 All hospitals licensed under this Act shall comply with the
20 following requirements:

21 (1) No hospital policy, rule, regulation, or practice shall
22 be inconsistent with the provision of adequate collaboration
23 ~~and consultation, including medical direction of licensed~~
24 ~~advanced practice nurses,~~ in accordance with Section 54.5 of
25 the Medical Practice Act of 1987.

1 (2) Operative surgical procedures shall be performed only
2 by a physician licensed to practice medicine in all its
3 branches under the Medical Practice Act of 1987, a dentist
4 licensed under the Illinois Dental Practice Act, or a
5 podiatrist licensed under the Podiatric Medical Practice Act of
6 1987, with medical staff membership and surgical clinical
7 privileges granted at the hospital. A licensed physician,
8 dentist, or podiatrist may be assisted by a physician licensed
9 to practice medicine in all its branches, dentist, dental
10 assistant, podiatrist, licensed advanced practice nurse,
11 licensed physician assistant, licensed registered nurse,
12 licensed practical nurse, surgical assistant, surgical
13 technician, or other individuals granted clinical privileges
14 to assist in surgery at the hospital. Payment for services
15 rendered by an assistant in surgery who is not a hospital
16 employee shall be paid at the appropriate non-physician
17 modifier rate if the payor would have made payment had the same
18 services been provided by a physician.

19 (2.5) A registered nurse licensed under the Nurse Practice
20 Act ~~Nursing and Advanced Practice Nursing Act~~ and qualified by
21 training and experience in operating room nursing shall be
22 present in the operating room and function as the circulating
23 nurse during all invasive or operative procedures. For purposes
24 of this paragraph (2.5), "circulating nurse" means a registered
25 nurse who is responsible for coordinating all nursing care,
26 patient safety needs, and the needs of the surgical team in the

1 operating room during an invasive or operative procedure.

2 (3) An advanced practice nurse is not required to possess
3 prescriptive authority or a written collaborative agreement
4 meeting the requirements of the Nurse Practice Act to provide
5 advanced practice nursing services in a hospital. An advanced
6 practice nurse must possess clinical privileges recommended by
7 the medical staff and granted by the hospital in order to
8 provide services. Individual advanced practice nurses may also
9 be granted clinical privileges to order, select, and administer
10 medications, including controlled substances, to provide
11 delineated care. The attending physician must determine the
12 advance practice nurse's role in providing care for his or her
13 patients, except as otherwise provided in medical staff bylaws.
14 The medical staff shall periodically review the services of
15 advanced practice nurses granted privileges. This review shall
16 be conducted in accordance with item (2) of subsection (a) of
17 Section 10.8 of this Act for advanced practice nurses employed
18 by the hospital.

19 (4) ~~(3)~~ The anesthesia service shall be under the direction
20 of a physician licensed to practice medicine in all its
21 branches who has had specialized preparation or experience in
22 the area or who has completed a residency in anesthesiology. An
23 anesthesiologist, Board certified or Board eligible, is
24 recommended. Anesthesia services may only be administered
25 pursuant to the order of a physician licensed to practice
26 medicine in all its branches, licensed dentist, or licensed

1 podiatrist.

2 (A) The individuals who, with clinical privileges
3 granted at the hospital, may administer anesthesia
4 services are limited to the following:

5 (i) an anesthesiologist; or

6 (ii) a physician licensed to practice medicine in
7 all its branches; or

8 (iii) a dentist with authority to administer
9 anesthesia under Section 8.1 of the Illinois Dental
10 Practice Act; or

11 (iv) a licensed certified registered nurse
12 anesthetist.

13 (B) For anesthesia services, an anesthesiologist shall
14 participate through discussion of and agreement with the
15 anesthesia plan and shall remain physically present and be
16 available on the premises during the delivery of anesthesia
17 services for diagnosis, consultation, and treatment of
18 emergency medical conditions. In the absence of 24-hour
19 availability of anesthesiologists with medical staff
20 privileges, an alternate policy (requiring participation,
21 presence, and availability of a physician licensed to
22 practice medicine in all its branches) shall be developed
23 by the medical staff and licensed hospital in consultation
24 with the anesthesia service.

25 (C) A certified registered nurse anesthetist is not
26 required to possess prescriptive authority or a written

1 collaborative agreement meeting the requirements of
2 Section 65-35 of the Nurse Practice Act ~~Section 15-15 of~~
3 ~~the Nursing and Advanced Practice Nursing Act~~ to provide
4 anesthesia services ordered by a licensed physician,
5 dentist, or podiatrist. Licensed certified registered
6 nurse anesthetists are authorized to select, order, and
7 administer drugs and apply the appropriate medical devices
8 in the provision of anesthesia services under the
9 anesthesia plan agreed with by the anesthesiologist or, in
10 the absence of an available anesthesiologist with clinical
11 privileges, agreed with by the operating physician,
12 operating dentist, or operating podiatrist in accordance
13 with the hospital's alternative policy.

14 (Source: P.A. 93-352, eff. 1-1-04; 94-915, eff. 1-1-07.)

15 (210 ILCS 85/10.9)

16 Sec. 10.9. Nurse mandated overtime prohibited.

17 (a) Definitions. As used in this Section:

18 "Mandated overtime" means work that is required by the
19 hospital in excess of an agreed-to, predetermined work shift.
20 Time spent by nurses required to be available as a condition of
21 employment in specialized units, such as surgical nursing
22 services, shall not be counted or considered in calculating the
23 amount of time worked for the purpose of applying the
24 prohibition against mandated overtime under subsection (b).

25 "Nurse" means any advanced practice nurse, registered

1 professional nurse, or licensed practical nurse, as defined in
2 the Nurse Practice Act ~~Nursing and Advanced Practice Nursing~~
3 ~~Act~~, who receives an hourly wage and has direct responsibility
4 to oversee or carry out nursing care. For the purposes of this
5 Section, "advanced practice nurse" does not include a certified
6 registered nurse anesthetist who is primarily engaged in
7 performing the duties of a nurse anesthetist.

8 "Unforeseen emergent circumstance" means (i) any declared
9 national, State, or municipal disaster or other catastrophic
10 event, or any implementation of a hospital's disaster plan,
11 that will substantially affect or increase the need for health
12 care services or (ii) any circumstance in which patient care
13 needs require specialized nursing skills through the
14 completion of a procedure. An "unforeseen emergent
15 circumstance" does not include situations in which the hospital
16 fails to have enough nursing staff to meet the usual and
17 reasonably predictable nursing needs of its patients.

18 (b) Mandated overtime prohibited. No nurse may be required
19 to work mandated overtime except in the case of an unforeseen
20 emergent circumstance when such overtime is required only as a
21 last resort. Such mandated overtime shall not exceed 4 hours
22 beyond an agreed-to, predetermined work shift.

23 (c) Off-duty period. When a nurse is mandated to work up to
24 12 consecutive hours, the nurse must be allowed at least 8
25 consecutive hours of off-duty time immediately following the
26 completion of a shift.

1 (d) Retaliation prohibited. No hospital may discipline,
2 discharge, or take any other adverse employment action against
3 a nurse solely because the nurse refused to work mandated
4 overtime as prohibited under subsection (b).

5 (e) Violations. Any employee of a hospital that is subject
6 to this Act may file a complaint with the Department of Public
7 Health regarding an alleged violation of this Section. The
8 complaint must be filed within 45 days following the occurrence
9 of the incident giving rise to the alleged violation. The
10 Department must forward notification of the alleged violation
11 to the hospital in question within 3 business days after the
12 complaint is filed. Upon receiving a complaint of a violation
13 of this Section, the Department may take any action authorized
14 under Section 7 or 9 of this Act.

15 (f) Proof of violation. Any violation of this Section must
16 be proved by clear and convincing evidence that a nurse was
17 required to work overtime against his or her will. The hospital
18 may defeat the claim of a violation by presenting clear and
19 convincing evidence that an unforeseen emergent circumstance,
20 which required overtime work, existed at the time the employee
21 was required or compelled to work.

22 (Source: P.A. 94-349, eff. 7-28-05.)

23 Section 100. The Hospital Report Card Act is amended by
24 changing Section 10 as follows:

1 (210 ILCS 86/10)

2 Sec. 10. Definitions. For the purpose of this Act:

3 "Average daily census" means the average number of
4 inpatients receiving service on any given 24-hour period
5 beginning at midnight in each clinical service area of the
6 hospital.

7 "Clinical service area" means a grouping of clinical
8 services by a generic class of various types or levels of
9 support functions, equipment, care, or treatment provided to
10 inpatients. Hospitals may have, but are not required to have,
11 the following categories of service: behavioral health,
12 critical care, maternal-child care, medical-surgical,
13 pediatrics, perioperative services, and telemetry.

14 "Department" means the Department of Public Health.

15 "Direct-care nurse" and "direct-care nursing staff"
16 includes any registered nurse, licensed practical nurse, or
17 assistive nursing personnel with direct responsibility to
18 oversee or carry out medical regimens or nursing care for one
19 or more patient.

20 "Hospital" means a health care facility licensed under the
21 Hospital Licensing Act.

22 "Nursing care" means care that falls within the scope of
23 practice set forth in the Nurse Practice Act ~~Nursing and~~
24 ~~Advanced Practice Nursing Act~~ or is otherwise encompassed
25 within recognized professional standards of nursing practice,
26 including assessment, nursing diagnosis, planning,

1 intervention, evaluation, and patient advocacy.

2 "Retaliate" means to discipline, discharge, suspend,
3 demote, harass, deny employment or promotion, lay off, or take
4 any other adverse action against direct-care nursing staff as a
5 result of that nursing staff taking any action described in
6 this Act.

7 "Skill mix" means the differences in licensing, specialty,
8 and experiences among direct-care nurses.

9 "Staffing levels" means the numerical nurse to patient
10 ratio by licensed nurse classification within a nursing
11 department or unit.

12 "Unit" means a functional division or area of a hospital in
13 which nursing care is provided.

14 (Source: P.A. 93-563, eff. 1-1-04.)

15 Section 105. The Illinois Dental Practice Act is amended by
16 changing Section 4 as follows:

17 (225 ILCS 25/4) (from Ch. 111, par. 2304)

18 (Section scheduled to be repealed on January 1, 2016)

19 Sec. 4. Definitions. As used in this Act:

20 (a) "Department" means the Illinois Department of
21 Professional Regulation.

22 (b) "Director" means the Director of Professional
23 Regulation.

24 (c) "Board" means the Board of Dentistry established by

1 Section 6 of this Act.

2 (d) "Dentist" means a person who has received a general
3 license pursuant to paragraph (a) of Section 11 of this Act and
4 who may perform any intraoral and extraoral procedure required
5 in the practice of dentistry and to whom is reserved the
6 responsibilities specified in Section 17.

7 (e) "Dental hygienist" means a person who holds a license
8 under this Act to perform dental services as authorized by
9 Section 18.

10 (f) "Dental assistant" means an appropriately trained
11 person who, under the supervision of a dentist, provides dental
12 services as authorized by Section 17.

13 (g) "Dental laboratory" means a person, firm or corporation
14 which:

15 (i) engages in making, providing, repairing or
16 altering dental prosthetic appliances and other artificial
17 materials and devices which are returned to a dentist for
18 insertion into the human oral cavity or which come in
19 contact with its adjacent structures and tissues; and

20 (ii) utilizes or employs a dental technician to provide
21 such services; and

22 (iii) performs such functions only for a dentist or
23 dentists.

24 (h) "Supervision" means supervision of a dental hygienist
25 or a dental assistant requiring that a dentist authorize the
26 procedure, remain in the dental facility while the procedure is

1 performed, and approve the work performed by the dental
2 hygienist or dental assistant before dismissal of the patient,
3 but does not mean that the dentist must be present at all times
4 in the treatment room.

5 (i) "General supervision" means supervision of a dental
6 hygienist requiring that the patient be a patient of record,
7 that the dentist examine the patient in accordance with Section
8 18 prior to treatment by the dental hygienist, and that the
9 dentist authorize the procedures which are being carried out by
10 a notation in the patient's record, but not requiring that a
11 dentist be present when the authorized procedures are being
12 performed. The issuance of a prescription to a dental
13 laboratory by a dentist does not constitute general
14 supervision.

15 (j) "Public member" means a person who is not a health
16 professional. For purposes of board membership, any person with
17 a significant financial interest in a health service or
18 profession is not a public member.

19 (k) "Dentistry" means the healing art which is concerned
20 with the examination, diagnosis, treatment planning and care of
21 conditions within the human oral cavity and its adjacent
22 tissues and structures, as further specified in Section 17.

23 (l) "Branches of dentistry" means the various specialties
24 of dentistry which, for purposes of this Act, shall be limited
25 to the following: endodontics, oral and maxillofacial surgery,
26 orthodontics and dentofacial orthopedics, pediatric dentistry,

1 periodontics, prosthodontics, and oral and maxillofacial
2 radiology.

3 (m) "Specialist" means a dentist who has received a
4 specialty license pursuant to Section 11(b).

5 (n) "Dental technician" means a person who owns, operates
6 or is employed by a dental laboratory and engages in making,
7 providing, repairing or altering dental prosthetic appliances
8 and other artificial materials and devices which are returned
9 to a dentist for insertion into the human oral cavity or which
10 come in contact with its adjacent structures and tissues.

11 (o) "Impaired dentist" or "impaired dental hygienist"
12 means a dentist or dental hygienist who is unable to practice
13 with reasonable skill and safety because of a physical or
14 mental disability as evidenced by a written determination or
15 written consent based on clinical evidence, including
16 deterioration through the aging process, loss of motor skills,
17 abuse of drugs or alcohol, or a psychiatric disorder, of
18 sufficient degree to diminish the person's ability to deliver
19 competent patient care.

20 (p) "Nurse" means a registered professional nurse, a
21 certified registered nurse anesthetist licensed as an advanced
22 practice nurse, or a licensed practical nurse licensed under
23 the Nurse Practice Act ~~Nursing and Advanced Practice Nursing~~
24 ~~Act~~.

25 (q) "Patient of record" means a patient for whom the
26 patient's most recent dentist has obtained a relevant medical

1 and dental history and on whom the dentist has performed an
2 examination and evaluated the condition to be treated.

3 (r) "Dental emergency responder" means a dentist or dental
4 hygienist who is appropriately certified in emergency medical
5 response, as defined by the Department of Public Health.

6 (Source: P.A. 93-821, eff. 7-28-04; 94-409, eff. 12-31-05.)

7 Section 110. The Health Care Worker Background Check Act is
8 amended by changing Section 25 as follows:

9 (225 ILCS 46/25)

10 Sec. 25. Persons ineligible to be hired by health care
11 employers and long-term care facilities.

12 (a) After January 1, 1996, January 1, 1997, or the
13 effective date of this amendatory Act of the 94th General
14 Assembly, as applicable, no health care employer shall
15 knowingly hire, employ, or retain any individual in a position
16 with duties involving direct care for clients, patients, or
17 residents, and no long-term care facility shall knowingly hire,
18 employ, or retain any individual in a position with duties that
19 involve or may involve contact with residents or access to the
20 living quarters or the financial, medical, or personal records
21 of residents, who has been convicted of committing or
22 attempting to commit one or more of the offenses defined in
23 Sections 8-1.1, 8-1.2, 9-1, 9-1.2, 9-2, 9-2.1, 9-3, 9-3.1,
24 9-3.2, 9-3.3, 10-1, 10-2, 10-3, 10-3.1, 10-4, 10-5, 10-7, 11-6,

1 11-9.1, 11-9.5, 11-19.2, 11-20.1, 12-1, 12-2, 12-3, 12-3.1,
2 12-3.2, 12-4, 12-4.1, 12-4.2, 12-4.3, 12-4.4, 12-4.5, 12-4.6,
3 12-4.7, 12-7.4, 12-11, 12-13, 12-14, 12-14.1, 12-15, 12-16,
4 12-19, 12-21, 12-21.6, 12-32, 12-33, 16-1, 16-1.3, 16A-3, 17-3,
5 18-1, 18-2, 18-3, 18-4, 18-5, 19-1, 19-3, 19-4, 20-1, 20-1.1,
6 24-1, 24-1.2, 24-1.5, or 33A-2 of the Criminal Code of 1961;
7 those provided in Section 4 of the Wrongs to Children Act;
8 those provided in Section 53 of the Criminal Jurisprudence Act;
9 those defined in Section 5, 5.1, 5.2, 7, or 9 of the Cannabis
10 Control Act; those defined in the Methamphetamine Control and
11 Community Protection Act; or those defined in Sections 401,
12 401.1, 404, 405, 405.1, 407, or 407.1 of the Illinois
13 Controlled Substances Act, unless the applicant or employee
14 obtains a waiver pursuant to Section 40.

15 (a-1) After January 1, 2004, no health care employer shall
16 knowingly hire any individual in a position with duties
17 involving direct care for clients, patients, or residents, and
18 no long-term care facility shall knowingly hire any individual
19 in a position with duties that involve or may involve contact
20 with residents or access to the living quarters or the
21 financial, medical, or personal records of residents, who has
22 (i) been convicted of committing or attempting to commit one or
23 more of the offenses defined in Section 12-3.3, 12-4.2-5, 16-2,
24 16G-15, 16G-20, 18-5, 20-1.2, 24-1.1, 24-1.2-5, 24-1.6,
25 24-3.2, or 24-3.3 of the Criminal Code of 1961; Section 4, 5,
26 6, 8, or 17.02 of the Illinois Credit Card and Debit Card Act;

1 or Section 5.1 of the Wrongs to Children Act; or (ii) violated
2 Section 50-50 of the Nurse Practice Act ~~Section 10-5 of the~~
3 ~~Nursing and Advanced Practice Nursing Act.~~

4 A UCIA criminal history record check need not be redone for
5 health care employees who have been continuously employed by a
6 health care employer since January 1, 2004, but nothing in this
7 Section prohibits a health care employer from initiating a
8 criminal history check for these employees.

9 A health care employer is not required to retain an
10 individual in a position with duties involving direct care for
11 clients, patients, or residents, and no long-term care facility
12 is required to retain an individual in a position with duties
13 that involve or may involve contact with residents or access to
14 the living quarters or the financial, medical, or personal
15 records of residents, who has been convicted of committing or
16 attempting to commit one or more of the offenses enumerated in
17 this subsection.

18 (b) A health care employer shall not hire, employ, or
19 retain any individual in a position with duties involving
20 direct care of clients, patients, or residents, and no
21 long-term care facility shall knowingly hire, employ, or retain
22 any individual in a position with duties that involve or may
23 involve contact with residents or access to the living quarters
24 or the financial, medical, or personal records of residents, if
25 the health care employer becomes aware that the individual has
26 been convicted in another state of committing or attempting to

1 commit an offense that has the same or similar elements as an
2 offense listed in subsection (a) or (a-1), as verified by court
3 records, records from a state agency, or an FBI criminal
4 history record check. This shall not be construed to mean that
5 a health care employer has an obligation to conduct a criminal
6 history records check in other states in which an employee has
7 resided.

8 (Source: P.A. 93-224, eff. 7-18-03; 94-556, eff. 9-11-05;
9 94-665, eff. 1-1-06; 94-1053, eff. 7-24-06.)

10 Section 115. The Health Care Worker Self-Referral Act is
11 amended by changing Section 15 as follows:

12 (225 ILCS 47/15)

13 Sec. 15. Definitions. In this Act:

14 (a) "Board" means the Health Facilities Planning Board.

15 (b) "Entity" means any individual, partnership, firm,
16 corporation, or other business that provides health services
17 but does not include an individual who is a health care worker
18 who provides professional services to an individual.

19 (c) "Group practice" means a group of 2 or more health care
20 workers legally organized as a partnership, professional
21 corporation, not-for-profit corporation, faculty practice plan
22 or a similar association in which:

23 (1) each health care worker who is a member or employee
24 or an independent contractor of the group provides

1 substantially the full range of services that the health
2 care worker routinely provides, including consultation,
3 diagnosis, or treatment, through the use of office space,
4 facilities, equipment, or personnel of the group;

5 (2) the services of the health care workers are
6 provided through the group, and payments received for
7 health services are treated as receipts of the group; and

8 (3) the overhead expenses and the income from the
9 practice are distributed by methods previously determined
10 by the group.

11 (d) "Health care worker" means any individual licensed
12 under the laws of this State to provide health services,
13 including but not limited to: dentists licensed under the
14 Illinois Dental Practice Act; dental hygienists licensed under
15 the Illinois Dental Practice Act; nurses and advanced practice
16 nurses licensed under the Nurse Practice Act ~~Nursing and~~
17 ~~Advanced Practice Nursing Act~~; occupational therapists
18 licensed under the Illinois Occupational Therapy Practice Act;
19 optometrists licensed under the Illinois Optometric Practice
20 Act of 1987; pharmacists licensed under the Pharmacy Practice
21 Act of 1987; physical therapists licensed under the Illinois
22 Physical Therapy Act; physicians licensed under the Medical
23 Practice Act of 1987; physician assistants licensed under the
24 Physician Assistant Practice Act of 1987; podiatrists licensed
25 under the Podiatric Medical Practice Act of 1987; clinical
26 psychologists licensed under the Clinical Psychologist

1 Licensing Act; clinical social workers licensed under the
2 Clinical Social Work and Social Work Practice Act;
3 speech-language pathologists and audiologists licensed under
4 the Illinois Speech-Language Pathology and Audiology Practice
5 Act; or hearing instrument dispensers licensed under the
6 Hearing Instrument Consumer Protection Act, or any of their
7 successor Acts.

8 (e) "Health services" means health care procedures and
9 services provided by or through a health care worker.

10 (f) "Immediate family member" means a health care worker's
11 spouse, child, child's spouse, or a parent.

12 (g) "Investment interest" means an equity or debt security
13 issued by an entity, including, without limitation, shares of
14 stock in a corporation, units or other interests in a
15 partnership, bonds, debentures, notes, or other equity
16 interests or debt instruments except that investment interest
17 for purposes of Section 20 does not include interest in a
18 hospital licensed under the laws of the State of Illinois.

19 (h) "Investor" means an individual or entity directly or
20 indirectly owning a legal or beneficial ownership or investment
21 interest, (such as through an immediate family member, trust,
22 or another entity related to the investor).

23 (i) "Office practice" includes the facility or facilities
24 at which a health care worker, on an ongoing basis, provides or
25 supervises the provision of professional health services to
26 individuals.

1 (j) "Referral" means any referral of a patient for health
2 services, including, without limitation:

3 (1) The forwarding of a patient by one health care
4 worker to another health care worker or to an entity
5 outside the health care worker's office practice or group
6 practice that provides health services.

7 (2) The request or establishment by a health care
8 worker of a plan of care outside the health care worker's
9 office practice or group practice that includes the
10 provision of any health services.

11 (Source: P.A. 89-72, eff. 12-31-95; 90-742, eff. 8-13-98.)

12 Section 120. The Medical Practice Act of 1987 is amended by
13 changing Sections 23 and 54.5 and by adding Section 8.1 as
14 follows:

15 (225 ILCS 60/8.1 new)

16 Sec. 8.1. Matters concerning advanced practice nurses. Any
17 proposed rules, amendments, second notice materials and
18 adopted rule or amendment materials, and policy statements
19 concerning advanced practice nurses shall be presented to the
20 Medical Licensing Board for review and comment. The
21 recommendations of both the Board of Nursing and the Medical
22 Licensing Board shall be presented to the Secretary for
23 consideration in making final decisions. Whenever the Board of
24 Nursing and the Medical Licensing Board disagree on a proposed

1 rule or policy, the Secretary shall convene a joint meeting of
2 the officers of each Board to discuss the resolution of any
3 such disagreements.

4 (225 ILCS 60/23) (from Ch. 111, par. 4400-23)

5 (Section scheduled to be repealed on December 31, 2008)

6 Sec. 23. Reports relating to professional conduct and
7 capacity.

8 (A) Entities required to report.

9 (1) Health care institutions. The chief administrator
10 or executive officer of any health care institution
11 licensed by the Illinois Department of Public Health shall
12 report to the Disciplinary Board when any person's clinical
13 privileges are terminated or are restricted based on a
14 final determination, in accordance with that institution's
15 by-laws or rules and regulations, that a person has either
16 committed an act or acts which may directly threaten
17 patient care, and not of an administrative nature, or that
18 a person may be mentally or physically disabled in such a
19 manner as to endanger patients under that person's care.
20 Such officer also shall report if a person accepts
21 voluntary termination or restriction of clinical
22 privileges in lieu of formal action based upon conduct
23 related directly to patient care and not of an
24 administrative nature, or in lieu of formal action seeking
25 to determine whether a person may be mentally or physically

1 disabled in such a manner as to endanger patients under
2 that person's care. The Medical Disciplinary Board shall,
3 by rule, provide for the reporting to it of all instances
4 in which a person, licensed under this Act, who is impaired
5 by reason of age, drug or alcohol abuse or physical or
6 mental impairment, is under supervision and, where
7 appropriate, is in a program of rehabilitation. Such
8 reports shall be strictly confidential and may be reviewed
9 and considered only by the members of the Disciplinary
10 Board, or by authorized staff as provided by rules of the
11 Disciplinary Board. Provisions shall be made for the
12 periodic report of the status of any such person not less
13 than twice annually in order that the Disciplinary Board
14 shall have current information upon which to determine the
15 status of any such person. Such initial and periodic
16 reports of impaired physicians shall not be considered
17 records within the meaning of The State Records Act and
18 shall be disposed of, following a determination by the
19 Disciplinary Board that such reports are no longer
20 required, in a manner and at such time as the Disciplinary
21 Board shall determine by rule. The filing of such reports
22 shall be construed as the filing of a report for purposes
23 of subsection (C) of this Section.

24 (2) Professional associations. The President or chief
25 executive officer of any association or society, of persons
26 licensed under this Act, operating within this State shall

1 report to the Disciplinary Board when the association or
2 society renders a final determination that a person has
3 committed unprofessional conduct related directly to
4 patient care or that a person may be mentally or physically
5 disabled in such a manner as to endanger patients under
6 that person's care.

7 (3) Professional liability insurers. Every insurance
8 company which offers policies of professional liability
9 insurance to persons licensed under this Act, or any other
10 entity which seeks to indemnify the professional liability
11 of a person licensed under this Act, shall report to the
12 Disciplinary Board the settlement of any claim or cause of
13 action, or final judgment rendered in any cause of action,
14 which alleged negligence in the furnishing of medical care
15 by such licensed person when such settlement or final
16 judgment is in favor of the plaintiff.

17 (4) State's Attorneys. The State's Attorney of each
18 county shall report to the Disciplinary Board all instances
19 in which a person licensed under this Act is convicted or
20 otherwise found guilty of the commission of any felony. The
21 State's Attorney of each county may report to the
22 Disciplinary Board through a verified complaint any
23 instance in which the State's Attorney believes that a
24 physician has willfully violated the notice requirements
25 of the Parental Notice of Abortion Act of 1995.

26 (5) State agencies. All agencies, boards, commissions,

1 departments, or other instrumentalities of the government
2 of the State of Illinois shall report to the Disciplinary
3 Board any instance arising in connection with the
4 operations of such agency, including the administration of
5 any law by such agency, in which a person licensed under
6 this Act has either committed an act or acts which may be a
7 violation of this Act or which may constitute
8 unprofessional conduct related directly to patient care or
9 which indicates that a person licensed under this Act may
10 be mentally or physically disabled in such a manner as to
11 endanger patients under that person's care.

12 (B) Mandatory reporting. All reports required by items
13 (34), (35), and (36) of subsection (A) of Section 22 and by
14 Section 23 shall be submitted to the Disciplinary Board in a
15 timely fashion. The reports shall be filed in writing within 60
16 days after a determination that a report is required under this
17 Act. All reports shall contain the following information:

18 (1) The name, address and telephone number of the
19 person making the report.

20 (2) The name, address and telephone number of the
21 person who is the subject of the report.

22 (3) The name and date of birth of any patient or
23 patients whose treatment is a subject of the report, if
24 available, or other means of identification if such
25 information is not available, identification of the
26 hospital or other healthcare facility where the care at

1 issue in the report was rendered, provided, however, no
2 medical records may be revealed.

3 (4) A brief description of the facts which gave rise to
4 the issuance of the report, including the dates of any
5 occurrences deemed to necessitate the filing of the report.

6 (5) If court action is involved, the identity of the
7 court in which the action is filed, along with the docket
8 number and date of filing of the action.

9 (6) Any further pertinent information which the
10 reporting party deems to be an aid in the evaluation of the
11 report.

12 The Disciplinary Board or Department may also exercise the
13 power under Section 38 of this Act to subpoena copies of
14 hospital or medical records in mandatory report cases alleging
15 death or permanent bodily injury. Appropriate rules shall be
16 adopted by the Department with the approval of the Disciplinary
17 Board.

18 When the Department has received written reports
19 concerning incidents required to be reported in items (34),
20 (35), and (36) of subsection (A) of Section 22, the licensee's
21 failure to report the incident to the Department under those
22 items shall not be the sole grounds for disciplinary action.

23 Nothing contained in this Section shall act to in any way,
24 waive or modify the confidentiality of medical reports and
25 committee reports to the extent provided by law. Any
26 information reported or disclosed shall be kept for the

1 confidential use of the Disciplinary Board, the Medical
2 Coordinators, the Disciplinary Board's attorneys, the medical
3 investigative staff, and authorized clerical staff, as
4 provided in this Act, and shall be afforded the same status as
5 is provided information concerning medical studies in Part 21
6 of Article VIII of the Code of Civil Procedure, except that the
7 Department may disclose information and documents to a federal,
8 State, or local law enforcement agency pursuant to a subpoena
9 in an ongoing criminal investigation. Furthermore, information
10 and documents disclosed to a federal, State, or local law
11 enforcement agency may be used by that agency only for the
12 investigation and prosecution of a criminal offense.

13 (C) Immunity from prosecution. Any individual or
14 organization acting in good faith, and not in a wilful and
15 wanton manner, in complying with this Act by providing any
16 report or other information to the Disciplinary Board or a peer
17 review committee, or assisting in the investigation or
18 preparation of such information, or by voluntarily reporting to
19 the Disciplinary Board or a peer review committee information
20 regarding alleged errors or negligence by a person licensed
21 under this Act, or by participating in proceedings of the
22 Disciplinary Board or a peer review committee, or by serving as
23 a member of the Disciplinary Board or a peer review committee,
24 shall not, as a result of such actions, be subject to criminal
25 prosecution or civil damages.

26 (D) Indemnification. Members of the Disciplinary Board,

1 the Medical Coordinators, the Disciplinary Board's attorneys,
2 the medical investigative staff, physicians retained under
3 contract to assist and advise the medical coordinators in the
4 investigation, and authorized clerical staff shall be
5 indemnified by the State for any actions occurring within the
6 scope of services on the Disciplinary Board, done in good faith
7 and not wilful and wanton in nature. The Attorney General shall
8 defend all such actions unless he or she determines either that
9 there would be a conflict of interest in such representation or
10 that the actions complained of were not in good faith or were
11 wilful and wanton.

12 Should the Attorney General decline representation, the
13 member shall have the right to employ counsel of his or her
14 choice, whose fees shall be provided by the State, after
15 approval by the Attorney General, unless there is a
16 determination by a court that the member's actions were not in
17 good faith or were wilful and wanton.

18 The member must notify the Attorney General within 7 days
19 of receipt of notice of the initiation of any action involving
20 services of the Disciplinary Board. Failure to so notify the
21 Attorney General shall constitute an absolute waiver of the
22 right to a defense and indemnification.

23 The Attorney General shall determine within 7 days after
24 receiving such notice, whether he or she will undertake to
25 represent the member.

26 (E) Deliberations of Disciplinary Board. Upon the receipt

1 of any report called for by this Act, other than those reports
2 of impaired persons licensed under this Act required pursuant
3 to the rules of the Disciplinary Board, the Disciplinary Board
4 shall notify in writing, by certified mail, the person who is
5 the subject of the report. Such notification shall be made
6 within 30 days of receipt by the Disciplinary Board of the
7 report.

8 The notification shall include a written notice setting
9 forth the person's right to examine the report. Included in
10 such notification shall be the address at which the file is
11 maintained, the name of the custodian of the reports, and the
12 telephone number at which the custodian may be reached. The
13 person who is the subject of the report shall submit a written
14 statement responding, clarifying, adding to, or proposing the
15 amending of the report previously filed. The person who is the
16 subject of the report shall also submit with the written
17 statement any medical records related to the report. The
18 statement and accompanying medical records shall become a
19 permanent part of the file and must be received by the
20 Disciplinary Board no more than 30 days after the date on which
21 the person was notified by the Disciplinary Board of the
22 existence of the original report.

23 The Disciplinary Board shall review all reports received by
24 it, together with any supporting information and responding
25 statements submitted by persons who are the subject of reports.
26 The review by the Disciplinary Board shall be in a timely

1 manner but in no event, shall the Disciplinary Board's initial
2 review of the material contained in each disciplinary file be
3 less than 61 days nor more than 180 days after the receipt of
4 the initial report by the Disciplinary Board.

5 When the Disciplinary Board makes its initial review of the
6 materials contained within its disciplinary files, the
7 Disciplinary Board shall, in writing, make a determination as
8 to whether there are sufficient facts to warrant further
9 investigation or action. Failure to make such determination
10 within the time provided shall be deemed to be a determination
11 that there are not sufficient facts to warrant further
12 investigation or action.

13 Should the Disciplinary Board find that there are not
14 sufficient facts to warrant further investigation, or action,
15 the report shall be accepted for filing and the matter shall be
16 deemed closed and so reported to the Secretary. The Secretary
17 shall then have 30 days to accept the Medical Disciplinary
18 Board's decision or request further investigation. The
19 Secretary shall inform the Board in writing of the decision to
20 request further investigation, including the specific reasons
21 for the decision. The individual or entity filing the original
22 report or complaint and the person who is the subject of the
23 report or complaint shall be notified in writing by the
24 Secretary of any final action on their report or complaint.

25 (F) Summary reports. The Disciplinary Board shall prepare,
26 on a timely basis, but in no event less than once ~~one~~ every

1 other month, a summary report of final actions taken upon
2 disciplinary files maintained by the Disciplinary Board. The
3 summary reports shall be made available to the public upon
4 request and payment of the fees set by the Department. This
5 publication may be made available to the public on the
6 Department's Internet website ~~sent by the Disciplinary Board to~~
7 ~~every health care facility licensed by the Illinois Department~~
8 ~~of Public Health, every professional association and society of~~
9 ~~persons licensed under this Act functioning on a statewide~~
10 ~~basis in this State, the American Medical Association, the~~
11 ~~American Osteopathic Association, the American Chiropractic~~
12 ~~Association, all insurers providing professional liability~~
13 ~~insurance to persons licensed under this Act in the State of~~
14 ~~Illinois, the Federation of State Medical Licensing Boards, and~~
15 ~~the Illinois Pharmacists Association.~~

16 (G) Any violation of this Section shall be a Class A
17 misdemeanor.

18 (H) If any such person violates the provisions of this
19 Section an action may be brought in the name of the People of
20 the State of Illinois, through the Attorney General of the
21 State of Illinois, for an order enjoining such violation or for
22 an order enforcing compliance with this Section. Upon filing of
23 a verified petition in such court, the court may issue a
24 temporary restraining order without notice or bond and may
25 preliminarily or permanently enjoin such violation, and if it
26 is established that such person has violated or is violating

1 the injunction, the court may punish the offender for contempt
2 of court. Proceedings under this paragraph shall be in addition
3 to, and not in lieu of, all other remedies and penalties
4 provided for by this Section.

5 (Source: P.A. 94-677, eff. 8-25-05.)

6 (225 ILCS 60/54.5)

7 (Section scheduled to be repealed on December 31, 2008)

8 Sec. 54.5. Physician delegation of authority.

9 (a) Physicians licensed to practice medicine in all its
10 branches may delegate care and treatment responsibilities to a
11 physician assistant under guidelines in accordance with the
12 requirements of the Physician Assistant Practice Act of 1987. A
13 physician licensed to practice medicine in all its branches may
14 enter into supervising physician agreements with no more than 2
15 physician assistants.

16 (b) A physician licensed to practice medicine in all its
17 branches in active clinical practice may collaborate with an
18 advanced practice nurse in accordance with the requirements of
19 the Nurse Practice Act ~~Title 15 of the Nursing and Advanced~~
20 ~~Practice Nursing Act~~. Collaboration is for the purpose of
21 providing medical consultation ~~direction~~, and no employment
22 relationship is required. A written collaborative agreement
23 shall conform to the requirements of Section 65-35 of the Nurse
24 Practice Act ~~Sections 15-15 and 15-20 of the Nursing and~~
25 ~~Advanced Practice Nursing Act~~. The written collaborative

1 agreement shall be for services the collaborating physician
2 generally provides to his or her patients in the normal course
3 of clinical medical practice. A written collaborative
4 agreement ~~Physician medical direction~~ shall be adequate with
5 respect to collaboration with advanced practice nurses
6 ~~certified nurse practitioners, certified nurse midwives, and~~
7 ~~clinical nurse specialists~~ if all of the following apply: a
8 ~~collaborating physician:~~

9 (1) The agreement is written to promote the exercise of
10 professional judgment by the advanced practice nurse
11 commensurate with his or her education and experience. The
12 agreement need not describe the exact steps that an
13 advanced practice nurse must take with respect to each
14 specific condition, disease, or symptom, but must specify
15 those procedures that require a physician's presence as the
16 procedures are being performed. ~~participates in the joint~~
17 ~~formulation and joint approval of orders or guidelines with~~
18 ~~the advanced practice nurse and periodically reviews such~~
19 ~~orders and the services provided patients under such orders~~
20 ~~in accordance with accepted standards of medical practice~~
21 ~~and advanced practice nursing practice;~~

22 (2) Practice guidelines and orders are developed and
23 approved jointly by the advanced practice nurse and
24 collaborating physician, as needed, based on the practice
25 of the practitioners. Such guidelines and orders and the
26 patient services provided thereunder are periodically

1 reviewed by the collaborating physician. ~~is on site at~~
2 ~~least once a month to provide medical direction and~~
3 ~~consultation; and~~

4 (3) The advance practice nurse provides services the
5 collaborating physician generally provides to his or her
6 patients in the normal course of clinical practice, except
7 as set forth in subsection (b-5) of this Section. With
8 respect to labor and delivery, the collaborating physician
9 must provide delivery services in order to participate with
10 a certified nurse midwife. ~~is available through~~
11 ~~telecommunications for consultation on medical problems,~~
12 ~~complications, or emergencies or patient referral.~~

13 (4) The collaborating physician and advanced practice
14 nurse meet in person at least once a month to provide
15 collaboration and consultation.

16 (5) Methods of communication are available with the
17 collaborating physician in person or through
18 telecommunications for consultation, collaboration, and
19 referral as needed to address patient care needs.

20 (6) The agreement contains provisions detailing notice
21 for termination or change of status involving a written
22 collaborative agreement, except when such notice is given
23 for just cause.

24 (b-5) An anesthesiologist or physician licensed to
25 practice medicine in all its branches may collaborate with a
26 certified registered nurse anesthetist in accordance with

1 Section 65-35 of the Nurse Practice Act for the provision of
2 anesthesia services. With respect to the provision of
3 anesthesia services, the collaborating anesthesiologist or
4 physician shall have training and experience in the delivery of
5 anesthesia services consistent with Department rules.
6 ~~Collaboration Section 15 25 of the Nursing and Advanced~~
7 ~~Practice Nursing Act. Medical direction for a certified~~
8 ~~registered nurse anesthetist shall be adequate if:~~

9 (1) an anesthesiologist or a physician participates in
10 the joint formulation and joint approval of orders or
11 guidelines and periodically reviews such orders and the
12 services provided patients under such orders; and

13 (2) for anesthesia services, the anesthesiologist or
14 physician participates through discussion of and agreement
15 with the anesthesia plan and is physically present and
16 available on the premises during the delivery of anesthesia
17 services for diagnosis, consultation, and treatment of
18 emergency medical conditions. Anesthesia services in a
19 hospital shall be conducted in accordance with Section 10.7
20 of the Hospital Licensing Act and in an ambulatory surgical
21 treatment center in accordance with Section 6.5 of the
22 Ambulatory Surgical Treatment Center Act.

23 (b-10) The anesthesiologist or operating physician must
24 agree with the anesthesia plan prior to the delivery of
25 services.

26 (c) The supervising physician shall have access to the

1 medical records of all patients attended by a physician
2 assistant. The collaborating physician shall have access to the
3 medical records of all patients attended to by an advanced
4 practice nurse.

5 (d) Nothing in this Act shall be construed to limit the
6 delegation of tasks or duties by a physician licensed to
7 practice medicine in all its branches to a licensed practical
8 nurse, a registered professional nurse, or other persons
9 ~~personnel~~.

10 (e) A physician shall not be liable for the acts or
11 omissions of a physician assistant or advanced practice nurse
12 solely on the basis of having signed a supervision agreement or
13 guidelines or a collaborative agreement, an order, a standing
14 medical order, a standing delegation order, or other order or
15 guideline authorizing a physician assistant or advanced
16 practice nurse to perform acts, unless the physician has reason
17 to believe the physician assistant or advanced practice nurse
18 lacked the competency to perform the act or acts or commits
19 willful and wanton misconduct.

20 (Source: P.A. 90-742, eff. 8-13-98; 91-414, eff. 8-6-99.)

21 Section 125. The Nursing and Advanced Practice Nursing Act
22 is amended by changing and renumbering Titles 5, 10, 15, 17,
23 and 20 as follows:

24 (225 ILCS 65/Art. 50 heading new) (was 225 ILCS 65/Tit. 5

1 heading)

2 Article 50 ~~TITLE 5~~. GENERAL PROVISIONS

3 (225 ILCS 65/50-1 new) (was 225 ILCS 65/5-1)

4 (Section scheduled to be repealed on January 1, 2008)

5 Sec. 50-1 ~~5-1~~. This Act ~~Article~~ may be cited as the Nurse
6 ~~Nursing and Advanced Practice Nursing Act,~~ and throughout this
7 ~~Article,~~ references to this Act shall mean this Article.

8 (Source: P.A. 90-742, eff. 8-13-98.)

9 (225 ILCS 65/50-5 new) (was 225 ILCS 65/5-5)

10 (Section scheduled to be repealed on January 1, 2008)

11 Sec. 50-5 ~~5-5~~. Legislative purpose. The practice of
12 professional and practical nursing in the State of Illinois is
13 hereby declared to affect the public health, safety, and
14 welfare and to be subject to regulation and control in the
15 public interest. It is further declared to be a matter of
16 public interest and concern that the practice of nursing, as
17 defined in this Act, merit and receive the confidence of the
18 public and that only qualified persons be authorized to so
19 practice in the State of Illinois. This Act shall be liberally
20 construed to best carry out these subjects and purposes.

21 (Source: P.A. 90-742, eff. 8-13-98.)

22 (225 ILCS 65/50-10 new) (was 225 ILCS 65/5-10)

23 (Section scheduled to be repealed on January 1, 2008)

1 Sec. 50-10 ~~5-10~~. Definitions. Each of the following terms,
2 when used in this Act, shall have the meaning ascribed to it in
3 this Section, except where the context clearly indicates
4 otherwise:

5 ~~(a) "Department" means the Department of Professional~~
6 ~~Regulation.~~

7 ~~(b) "Director" means the Director of Professional~~
8 ~~Regulation.~~

9 ~~(c) "Board" means the Board of Nursing appointed by the~~
10 ~~Director.~~

11 ~~(d) "Academic year" means the customary annual schedule of~~
12 courses at a college, university, or approved school,
13 customarily regarded as the school year as distinguished from
14 the calendar year.

15 "Advanced practice nurse" or "APN" means a person who has
16 met the qualifications for a (i) certified nurse midwife (CNM);
17 (ii) certified nurse practitioner (CNP); (iii) certified
18 registered nurse anesthetist (CRNA); or (iv) clinical nurse
19 specialist (CNS) and has been licensed by the Department. All
20 advanced practice nurses licensed and practicing in the State
21 of Illinois shall use the title APN and may use speciality
22 credentials after their name.

23 ~~(e) "Approved program of professional nursing education"~~
24 and "approved program of practical nursing education" are
25 programs of professional or practical nursing, respectively,
26 approved by the Department under the provisions of this Act.

1 "Board" means the Board of Nursing appointed by the
2 Secretary.

3 "Collaboration" means a process involving 2 or more health
4 care professionals working together, each contributing one's
5 respective area of expertise to provide more comprehensive
6 patient care.

7 "Consultation" means the process whereby an advanced
8 practice nurse seeks the advice or opinion of another health
9 care professional.

10 "Credentialed" means the process of assessing and
11 validating the qualifications of a health care professional.

12 "Current nursing practice update course" means a planned
13 nursing education curriculum approved by the Department
14 consisting of activities that have educational objectives,
15 instructional methods, content or subject matter, clinical
16 practice, and evaluation methods, related to basic review and
17 updating content and specifically planned for those nurses
18 previously licensed in the United States or its territories and
19 preparing for reentry into nursing practice.

20 "Dentist" means a person licensed to practice dentistry
21 under the Illinois Dental Practice Act.

22 "Department" means the Department of Financial and
23 Professional Regulation.

24 "Impaired nurse" means a nurse licensed under this Act who
25 is unable to practice with reasonable skill and safety because
26 of a physical or mental disability as evidenced by a written

1 determination or written consent based on clinical evidence,
2 including loss of motor skills, abuse of drugs or alcohol, or a
3 psychiatric disorder, of sufficient degree to diminish his or
4 her ability to deliver competent patient care.

5 "License-pending advanced practice nurse" means a
6 registered professional nurse who has completed all
7 requirements for licensure as an advanced practice nurse except
8 the certification examination and has applied to take the next
9 available certification exam and received a temporary license
10 from the Department.

11 "License-pending registered nurse" means a person who has
12 passed the Department-approved registered nurse licensure exam
13 and has applied for a license from the Department. A
14 license-pending registered nurse shall use the title "RN lic
15 pend" on all documentation related to nursing practice.

16 "Physician" means a person licensed to practice medicine in
17 all its branches under the Medical Practice Act of 1987.

18 "Podiatrist" means a person licensed to practice podiatry
19 under the Podiatric Medical Practice Act of 1987.

20 ~~(f) "Nursing Act Coordinator" means a registered~~
21 ~~professional nurse appointed by the Director to carry out the~~
22 ~~administrative policies of the Department.~~

23 ~~(g) "Assistant Nursing Act Coordinator" means a registered~~
24 ~~professional nurse appointed by the Director to assist in~~
25 ~~carrying out the administrative policies of the Department.~~

26 ~~(h) "Registered" is the equivalent of "licensed".~~

1 ~~(i)~~ "Practical nurse" or "licensed practical nurse" means a
2 person who is licensed as a practical nurse under this Act and
3 practices practical nursing as defined in ~~paragraph (j) of this~~
4 Act Section. Only a practical nurse licensed under this Act is
5 entitled to use the title "licensed practical nurse" and the
6 abbreviation "L.P.N.".

7 ~~(j)~~ "Practical nursing" means the performance of nursing
8 acts requiring the basic nursing knowledge, judgement, and
9 skill acquired by means of completion of an approved practical
10 nursing education program. Practical nursing includes
11 assisting in the nursing process as delegated by ~~and under the~~
12 ~~direction of~~ a registered professional nurse or an advanced
13 practice nurse. The practical nurse may work under the
14 direction of a licensed physician, dentist, podiatrist, or
15 other health care professional determined by the Department.

16 "Privileged" means the authorization granted by the
17 governing body of a healthcare facility, agency, or
18 organization to provide specific patient care services within
19 well-defined limits, based on qualifications reviewed in the
20 credentialing process.

21 ~~(k)~~ "Registered Nurse" or "Registered Professional Nurse"
22 means a person who is licensed as a professional nurse under
23 this Act and practices nursing as defined in ~~paragraph (l) of~~
24 this Act Section. Only a registered nurse licensed under this
25 Act is entitled to use the titles "registered nurse" and
26 "registered professional nurse" and the abbreviation, "R.N.".

1 ~~(1)~~ "Registered professional nursing practice" is a
2 scientific process founded on a professional body of knowledge;
3 it is a learned profession based on the understanding of the
4 human condition across the life span and environment and
5 includes all nursing specialities and means the performance of
6 any nursing act based upon professional knowledge, judgment,
7 and skills acquired by means of completion of an approved
8 ~~registered~~ professional nursing education program. A
9 registered professional nurse provides holistic nursing care
10 ~~emphasizing the importance of the whole and the interdependence~~
11 ~~of its parts~~ through the nursing process to individuals,
12 groups, families, or communities, that includes but is not
13 limited to: (1) the assessment of healthcare needs, nursing
14 diagnosis, planning, implementation, and nursing evaluation;
15 (2) the promotion, maintenance, and restoration of health; (3)
16 counseling, patient education, health education, and patient
17 advocacy; (4) the administration of medications and treatments
18 as prescribed by a physician licensed to practice medicine in
19 all of its branches, a licensed dentist, a licensed podiatrist,
20 or a licensed optometrist or as prescribed by a physician
21 assistant in accordance with written guidelines required under
22 the Physician Assistant Practice Act of 1987 or by an advanced
23 practice nurse in accordance with Article 65 of this ~~a written~~
24 ~~collaborative agreement required under the Nursing and~~
25 ~~Advanced Practice Nursing~~ Act; (5) the coordination and
26 management of the nursing plan of care; (6) the delegation to

1 and supervision of individuals who assist the registered
2 professional nurse implementing the plan of care; and (7)
3 teaching ~~and supervision of~~ nursing students. The foregoing
4 shall not be deemed to include those acts of medical diagnosis
5 or prescription of therapeutic or corrective measures ~~that are~~
6 ~~properly performed only by physicians licensed in the State of~~
7 ~~Illinois.~~

8 ~~(m) "Current nursing practice update course" means a~~
9 ~~planned nursing education curriculum approved by the~~
10 ~~Department consisting of activities that have educational~~
11 ~~objectives, instructional methods, content or subject matter,~~
12 ~~clinical practice, and evaluation methods, related to basic~~
13 ~~review and updating content and specifically planned for those~~
14 ~~nurses previously licensed in the United States or its~~
15 ~~territories and preparing for reentry into nursing practice.~~

16 ~~(n) "Professional assistance program for nurses" means a~~
17 ~~professional assistance program that meets criteria~~
18 ~~established by the Board of Nursing and approved by the~~
19 ~~Secretary ~~Director~~, which provides a non-disciplinary~~
20 ~~treatment approach for nurses licensed under this Act whose~~
21 ~~ability to practice is compromised by alcohol or chemical~~
22 ~~substance addiction.~~

23 ~~"Secretary" means the Secretary of Financial and~~
24 ~~Professional Regulation.~~

25 ~~"Unencumbered license" means a license issued in good~~
26 ~~standing.~~

1 "Written collaborative agreement" means a written
2 agreement between an advanced practice nurse and a
3 collaborating physician, dentist, or podiatrist pursuant to
4 Section 65-35.

5 (Source: P.A. 90-61, eff. 12-30-97; 90-248, eff. 1-1-98;
6 90-655, eff. 7-30-98; 90-742, eff. 8-13-98.)

7 (225 ILCS 65/50-15 new) (was 225 ILCS 65/5-15)

8 (Section scheduled to be repealed on January 1, 2008)

9 Sec. 50-15 ~~5-15~~. Policy; application of Act.

10 (a) For the protection of life and the promotion of health,
11 and the prevention of illness and communicable diseases, any
12 person practicing or offering to practice advanced,
13 professional, or ~~and~~ practical nursing in Illinois shall submit
14 evidence that he or she is qualified to practice, and shall be
15 licensed as provided under this Act. No person shall practice
16 or offer to practice advanced, professional, or practical
17 nursing in Illinois or use any title, sign, card or device to
18 indicate that such a person is practicing professional or
19 practical nursing unless such person has been licensed under
20 the provisions of this Act.

21 (b) This Act does not prohibit the following:

22 (1) ~~(a)~~ The practice of nursing in Federal employment
23 in the discharge of the employee's duties by a person who
24 is employed by the United States government or any bureau,
25 division or agency thereof and is a legally qualified and

1 licensed nurse of another state or territory and not in
2 conflict with Sections 50-50, 55-10, 60-10, and 70-5 ~~10-5,~~
3 ~~10-30, and 10-45~~ of this Act.

4 (2) ~~(b)~~ Nursing that is included in the ~~their~~ program
5 of study by students enrolled in programs of nursing or in
6 current nurse practice update courses approved by the
7 Department.

8 (3) ~~(c)~~ The furnishing of nursing assistance in an
9 emergency.

10 (4) ~~(d)~~ The practice of nursing by a nurse who holds an
11 active license in another state when providing services to
12 patients in Illinois during a bonafide emergency or in
13 immediate preparation for or during interstate transit.

14 (5) ~~(e)~~ The incidental care of the sick by members of
15 the family, domestic servants or housekeepers, or care of
16 the sick where treatment is by prayer or spiritual means.

17 (6) ~~(f)~~ Persons from being employed as unlicensed
18 assistive personnel ~~nursing aides, attendants, orderlies,~~
19 ~~and other auxiliary workers~~ in private homes, long term
20 care facilities, nurseries, hospitals or other
21 institutions.

22 ~~(g) The practice of practical nursing by one who has~~
23 ~~applied in writing to the Department in form and substance~~
24 ~~satisfactory to the Department, for a license as a licensed~~
25 ~~practical nurse and who has complied with all the~~
26 ~~provisions under Section 10-30, except the passing of an~~

1 ~~examination to be eligible to receive such license, until:~~
2 ~~the decision of the Department that the applicant has~~
3 ~~failed to pass the next available examination authorized by~~
4 ~~the Department or has failed, without an approved excuse,~~
5 ~~to take the next available examination authorized by the~~
6 ~~Department or until the withdrawal of the application, but~~
7 ~~not to exceed 3 months. An applicant practicing practical~~
8 ~~nursing under this Section who passes the examination,~~
9 ~~however, may continue to practice under this Section until~~
10 ~~such time as he or she receives his or her license to~~
11 ~~practice or until the Department notifies him or her that~~
12 ~~the license has been denied. No applicant for licensure~~
13 ~~practicing under the provisions of this paragraph shall~~
14 ~~practice practical nursing except under the direct~~
15 ~~supervision of a registered professional nurse licensed~~
16 ~~under this Act or a licensed physician, dentist or~~
17 ~~podiatrist. In no instance shall any such applicant~~
18 ~~practice or be employed in any supervisory capacity.~~

19 (7) ~~(h)~~ The practice of practical nursing by one who is
20 a licensed practical nurse under the laws of another U.S.
21 jurisdiction and has applied in writing to the Department,
22 in form and substance satisfactory to the Department, for a
23 license as a licensed practical nurse and who is qualified
24 to receive such license under this Act ~~Section 10-30~~, until
25 (i) ~~(1)~~ the expiration of 6 months after the filing of such
26 written application, (ii) ~~(2)~~ the withdrawal of such

1 application, or (iii) ~~(3)~~ the denial of such application by
2 the Department.

3 ~~(i) The practice of professional nursing by one who has~~
4 ~~applied in writing to the Department in form and substance~~
5 ~~satisfactory to the Department for a license as a~~
6 ~~registered professional nurse and has complied with all the~~
7 ~~provisions under Section 10-30 except the passing of an~~
8 ~~examination to be eligible to receive such license, until~~
9 ~~the decision of the Department that the applicant has~~
10 ~~failed to pass the next available examination authorized by~~
11 ~~the Department or has failed, without an approved excuse,~~
12 ~~to take the next available examination authorized by the~~
13 ~~Department or until the withdrawal of the application, but~~
14 ~~not to exceed 3 months. An applicant practicing~~
15 ~~professional nursing under this Section who passes the~~
16 ~~examination, however, may continue to practice under this~~
17 ~~Section until such time as he or she receives his or her~~
18 ~~license to practice or until the Department notifies him or~~
19 ~~her that the license has been denied. No applicant for~~
20 ~~licensure practicing under the provisions of this~~
21 ~~paragraph shall practice professional nursing except under~~
22 ~~the direct supervision of a registered professional nurse~~
23 ~~licensed under this Act. In no instance shall any such~~
24 ~~applicant practice or be employed in any supervisory~~
25 ~~capacity.~~

26 (8) The practice of advanced practice nursing by one

1 who is an advanced practice nurse under the laws of another
2 state, territory of the United States, or country and has
3 applied in writing to the Department, in form and substance
4 satisfactory to the Department, for a license as an
5 advanced practice nurse and who is qualified to receive
6 such license under this Act, until (i) the expiration of 6
7 months after the filing of such written application, (ii)
8 the withdrawal of such application, or (iii) the denial of
9 such application by the Department.

10 (9) ~~(j)~~ The practice of professional nursing by one who
11 is a registered professional nurse under the laws of
12 another state, territory of the United States or country
13 and has applied in writing to the Department, in form and
14 substance satisfactory to the Department, for a license as
15 a registered professional nurse and who is qualified to
16 receive such license under Section 55-10 ~~10-30~~, until (1)
17 the expiration of 6 months after the filing of such written
18 application, (2) the withdrawal of such application, or (3)
19 the denial of such application by the Department.

20 (10) ~~(k)~~ The practice of professional nursing that is
21 included in a program of study by one who is a registered
22 professional nurse under the laws of another state or
23 territory of the United States or foreign country,
24 territory or province and who is enrolled in a graduate
25 nursing education program or a program for the completion
26 of a baccalaureate nursing degree in this State, which

1 includes clinical supervision by faculty as determined by
2 the educational institution offering the program and the
3 health care organization where the practice of nursing
4 occurs. ~~The educational institution will file with the~~
5 ~~Department each academic term a list of the names and~~
6 ~~origin of license of all professional nurses practicing~~
7 ~~nursing as part of their programs under this provision.~~

8 (11) ~~(1)~~ Any person licensed in this State under any
9 other Act from engaging in the practice for which she or he
10 is licensed.

11 (12) ~~(m)~~ Delegation to authorized direct care staff
12 trained under Section 15.4 of the Mental Health and
13 Developmental Disabilities Administrative Act consistent
14 with the policies of the Department.

15 (13) Nothing in this Act shall be construed to limit
16 the delegation of tasks or duties by a physician, dentist,
17 or podiatrist to a licensed practical nurse, a registered
18 professional nurse, or other persons.

19 ~~An applicant for license practicing under the exceptions~~
20 ~~set forth in subparagraphs (g), (h), (i), and (j) of this~~
21 ~~Section shall use the title R.N. Lic. Pend. or L.P.N. Lic.~~
22 ~~Pend. respectively and no other.~~

23 (Source: P.A. 93-265, eff. 7-22-03.)

24 (225 ILCS 65/50-20 new) (was 225 ILCS 65/5-20)

25 (Section scheduled to be repealed on January 1, 2008)

1 Sec. 50-20 ~~5-20~~. Unlicensed practice; violation; civil
2 penalty.

3 (a) Any person who practices, offers to practice, attempts
4 to practice, or holds oneself out to practice nursing without
5 being licensed under this Act shall, in addition to any other
6 penalty provided by law, pay a civil penalty to the Department
7 in an amount not to exceed \$10,000 ~~\$5,000~~ for each offense as
8 determined by the Department. The civil penalty shall be
9 assessed by the Department after a hearing is held in
10 accordance with the provisions set forth in this Act regarding
11 the provision of a hearing for the discipline of a licensee.

12 (b) The Department has the authority and power to
13 investigate any and all unlicensed activity.

14 (c) The civil penalty shall be paid within 60 days after
15 the effective date of the order imposing the civil penalty. The
16 order shall constitute a judgment and may be filed and
17 execution had thereon in the same manner as any judgment from
18 any court of record.

19 (Source: P.A. 89-474, eff. 6-18-96; 90-742, eff. 8-13-98.)

20 (225 ILCS 65/50-25 new) (was 225 ILCS 65/5-21)

21 (Section scheduled to be repealed on January 1, 2008)

22 Sec. 50-25 ~~5-21~~. No registered nurse or licensed practical
23 nurse may perform refractions and other determinations of
24 visual function or eye health diagnosis. A registered nurse or
25 licensed practical nurse may participate in these activities

1 with the direct on-site supervision of an optometrist licensed
2 under the Illinois Optometric Practice Act of 1987 or a
3 physician licensed to practice medicine in all its branches
4 under the Medical Practice Act of 1987.

5 (Source: P.A. 92-367, eff. 8-15-01.)

6 (225 ILCS 65/50-30 new) (was 225 ILCS 65/5-22)

7 (Section scheduled to be repealed on January 1, 2008)

8 Sec. 50-30 ~~5-22~~. Social Security Number on license
9 application. In addition to any other information required to
10 be contained in an the application for licensure under this
11 Act, every application for an original, renewal, or restored
12 license under this Act shall include the applicant's Social
13 Security Number.

14 (Source: P.A. 90-144, eff. 7-23-97; 90-742, eff. 8-13-98.)

15 (225 ILCS 65/50-35 new) (was 225 ILCS 65/5-23)

16 (Section scheduled to be repealed on January 1, 2008)

17 Sec. 50-35 ~~5-23~~. Criminal history records background
18 check. Each applicant for licensure by examination or
19 restoration shall have his or her fingerprints submitted to the
20 Department of State Police in an electronic format that
21 complies with the form and manner for requesting and furnishing
22 criminal history record information as prescribed by the
23 Department of State Police. These fingerprints shall be checked
24 against the Department of State Police and Federal Bureau of

1 Investigation criminal history record databases now and
2 hereafter filed. The Department of State Police shall charge
3 applicants a fee for conducting the criminal history records
4 check, which shall be deposited into the State Police Services
5 Fund and shall not exceed the actual cost of the records check.
6 The Department of State Police shall furnish, pursuant to
7 positive identification, records of Illinois convictions to
8 the Department. The Department may require applicants to pay a
9 separate fingerprinting fee, either to the Department or to a
10 vendor. The Department, in its discretion, may allow an
11 applicant who does not have reasonable access to a designated
12 vendor to provide his or her fingerprints in an alternative
13 manner. The Department may adopt any rules necessary to
14 implement this Section. After the effective date of this
15 ~~amendatory Act of the 91st General Assembly, the Department~~
16 ~~shall require an applicant for initial licensure under this Act~~
17 ~~to submit to a criminal background check by the Illinois State~~
18 ~~Police and the Federal Bureau of Investigation as part of the~~
19 ~~qualification for licensure. If an applicant's criminal~~
20 ~~background check indicates criminal conviction, the applicant~~
21 ~~must further submit to a fingerprint-based criminal background~~
22 ~~check. The applicant's name, sex, race, date of birth, and~~
23 ~~social security number shall be forwarded to the Illinois State~~
24 ~~Police to be searched against the Illinois criminal history~~
25 ~~records database in the form and manner prescribed by the~~
26 ~~Illinois State Police. The Illinois State Police shall charge a~~

1 ~~fee for conducting the search, which shall be deposited in the~~
2 ~~State Police Services Fund and shall not exceed the cost of the~~
3 ~~inquiry. If a search of the Illinois criminal history records~~
4 ~~database indicates that the applicant has a conviction record,~~
5 ~~a fingerprint based criminal history records check shall be~~
6 ~~required. Each applicant requiring a fingerprint based search~~
7 ~~shall submit his or her fingerprints to the Illinois State~~
8 ~~Police in the form and manner prescribed by the Illinois State~~
9 ~~Police. These fingerprints shall be checked against the~~
10 ~~fingerprint records now and hereafter filed in the Illinois~~
11 ~~State Police and Federal Bureau of Investigation criminal~~
12 ~~history records databases. The Illinois State Police shall~~
13 ~~charge a fee for conducting the criminal history records check,~~
14 ~~which shall be deposited in the State Police Services Fund and~~
15 ~~shall not exceed the actual cost of the records check. The~~
16 ~~Illinois State Police shall furnish, pursuant to positive~~
17 ~~identification, records of Illinois convictions to the~~
18 ~~Department. The Department shall adopt rules to implement this~~
19 ~~Section.~~

20 (Source: P.A. 92-744, eff. 7-25-02; 93-418, eff. 1-1-04.)

21 (225 ILCS 65/50-40 new) (was 225 ILCS 65/5-25)

22 (Section scheduled to be repealed on January 1, 2008)

23 Sec. 50-40 ~~5-25~~. Emergency care; civil liability.
24 Exemption from civil liability for emergency care is as
25 provided in the Good Samaritan Act.

1 (Source: P.A. 89-607, eff. 1-1-97; 90-742, eff. 8-13-98.)

2 (225 ILCS 65/50-45 new) (was 225 ILCS 65/5-30)

3 (Section scheduled to be repealed on January 1, 2008)

4 Sec. 50-45 ~~5-30~~. Services rendered without compensation;
5 civil liability. Exemption from civil liability for services
6 rendered without compensation is as provided in the Good
7 Samaritan Act.

8 (Source: P.A. 89-607, eff. 1-1-97; 90-742, eff. 8-13-98.)

9 (225 ILCS 65/50-50 new) (was 225 ILCS 65/10-5)

10 (Section scheduled to be repealed on January 1, 2008)

11 Sec. 50-50 ~~10-5~~. Prohibited acts.

12 (a) No person shall:

13 (1) Practice as an advanced practice nurse without a
14 valid license as an advanced practice nurse, except as
15 provided in Section 50-15 of this Act;

16 (2) ~~(a)~~ Practice professional nursing without a valid
17 license as a registered professional nurse except as
18 provided in ~~paragraphs (i) and (j)~~ of Section 50-15 ~~5-15~~ of
19 this Act;

20 (3) ~~(b)~~ Practice practical nursing without a valid
21 license as a licensed practical nurse~~;~~ or practice
22 practical nursing~~, other than under the direction of a~~
23 ~~licensed physician, licensed dentist, or registered~~
24 ~~professional nurse;~~ except as provided in ~~paragraphs (g),~~

1 ~~(h), and (j)~~ of Section 50-15 ~~5-15~~ of this Act;

2 (4) ~~(e)~~ Practice nursing under cover of any diploma,
3 license, or record illegally or fraudulently obtained or
4 signed or issued unlawfully or under fraudulent
5 representation;

6 (5) ~~(d)~~ Practice nursing during the time her or his
7 license is suspended, revoked, expired or on inactive
8 status;

9 (6) ~~(e)~~ Use any words, abbreviations, figures,
10 letters, title, sign, card, or device tending to imply that
11 she or he is a registered professional nurse, including the
12 titles or initials, "Nurse," "Registered Nurse,"
13 "Professional Nurse," "Registered Professional Nurse,"
14 "Certified Nurse," "Trained Nurse," "Graduate Nurse,"
15 "P.N.," or "R.N.," or "R.P.N." or similar titles or
16 initials with intention of indicating practice without a
17 valid license as a registered professional nurse;

18 (7) Use any words, abbreviations, figures, letters,
19 titles, signs, cards, or devices tending to imply that she
20 or he is an advanced practice nurse, including the titles
21 or initials "Advanced Practice Nurse", "A.P.N.", or
22 similar titles or initials, with the intention of
23 indicating practice as an advanced practice nurse without a
24 valid license as an advanced practice nurse under this Act.

25 (8) ~~(f)~~ Use any words, abbreviations figures, letters,
26 title, sign, card, or device tending to imply that she or

1 he is a licensed practical nurse including the titles or
2 initials "Practical Nurse," "Licensed Practical Nurse,"
3 "P.N.," or "L.P.N.," or similar titles or initials with
4 intention of indicated practice as a licensed practical
5 nurse without a valid license as a licensed practical nurse
6 under this Act;

7 (9) ~~(f-5)~~ Advertise services regulated under this Act
8 without including in every advertisement his or her title
9 as it appears on the license or the initials authorized
10 under this Act;

11 (10) ~~(g)~~ Obtain or furnish a license by or for money or
12 any other thing of value other than the fees required under
13 this Act ~~by Section 20-35,~~ or by any fraudulent
14 representation or act;

15 (11) ~~(h)~~ Make any wilfully false oath or affirmation
16 required by this Act;

17 (12) ~~(i)~~ Conduct a nursing education program preparing
18 persons for licensure that has not been approved by the
19 Department;

20 (13) ~~(j)~~ Represent that any school or course is
21 approved or accredited as a school or course for the
22 education of registered professional nurses or licensed
23 practical nurses unless such school or course is approved
24 by the Department under the provisions of this Act;

25 (14) ~~(k)~~ Attempt or offer to do any of the acts
26 enumerated in this Section, or knowingly aid, abet, assist

1 in the doing of any such acts or in the attempt or offer to
2 do any of such acts;

3 ~~(l) Seek employment as a registered professional nurse~~
4 ~~under the terms of paragraphs (i) and (j) of Section 5-15 of~~
5 ~~this Act without possessing a written authorization which has~~
6 ~~been issued by the Department or designated testing service and~~
7 ~~which evidences the filing of the written application referred~~
8 ~~to in paragraphs (i) and (j) of Section 5-15 of this Act;~~

9 ~~(m) Seek employment as a licensed practical nurse under the~~
10 ~~terms of paragraphs (g) and (h) of Section 5-15 of this Act~~
11 ~~without possessing a written authorization which has been~~
12 ~~issued by the Department or designated testing service and~~
13 ~~which evidences the filing of the written application referred~~
14 ~~to in paragraphs (g) and (h) of Section 5-15 of this Act;~~

15 (15) ~~(n)~~ Employ ~~or utilize~~ persons not licensed under
16 this Act to practice professional nursing or practical
17 nursing; and

18 (16) ~~(o)~~ Otherwise intentionally violate any provision
19 of this Act.

20 (17) Retaliate against any nurse who reports unsafe,
21 unethical, or illegal health care practices or conditions.

22 (18) Be deemed a supervisor when delegating nursing
23 activities or tasks as authorized under this Act.

24 (b) Any person, including a firm, association or
25 corporation who violates any provision of this Section shall be
26 guilty of a Class A misdemeanor.

1 (Source: P.A. 90-742, eff. 8-13-98; 91-310, eff. 1-1-00.)

2 (225 ILCS 65/50-55 new) (was 225 ILCS 65/10-10)

3 (Section scheduled to be repealed on January 1, 2008)

4 Sec. 50-55 ~~10-10~~. Department powers and duties.

5 (a) The Department shall exercise the powers and duties
6 prescribed by the Civil Administrative Code of Illinois for
7 administration of licensing acts and shall exercise other
8 powers and duties necessary for effectuating the purpose of
9 this Act. None of the functions, powers, or duties of the
10 Department with respect to licensure and examination shall be
11 exercised by the Department except upon review by the Board.
12 The Department shall adopt rules to implement, interpret, or
13 make specific the provisions and purposes of this Act; however
14 no such rules shall be adopted by the Department except upon
15 review by the Board.

16 (b) The Department shall ~~:(1)~~ prepare and maintain a list
17 of approved programs of professional nursing education and
18 programs of practical nursing education in this State, whose
19 graduates, if they have the other necessary qualifications
20 provided in this Act, shall be eligible to apply for a license
21 to practice nursing in this State. ~~;~~

22 ~~(2) promulgate rules defining what constitutes an~~
23 ~~approved program of professional nursing education and~~
24 ~~what constitutes an approved program of practical nursing~~
25 ~~education; and~~

1 ~~(3) adopt rules for examination of candidates for~~
2 ~~licenses and for issuance of licenses authorizing~~
3 ~~candidates upon passing an examination to practice under~~
4 ~~this Act.~~

5 (c) The Department may act upon the recommendations of the
6 Center for Nursing Advisory Board.

7 (Source: P.A. 94-1020, eff. 7-11-06.)

8 (225 ILCS 65/50-60 new) (was 225 ILCS 65/10-15)

9 (Section scheduled to be repealed on January 1, 2008)

10 Sec. 50-60 ~~10-15~~. Nursing ~~Act~~ Coordinator; Assistant
11 Nursing Coordinator. The Secretary ~~Department~~ shall appoint
12 ~~obtain~~, pursuant to the Personnel Code, a Nursing ~~Act~~
13 Coordinator and an Assistant Nursing Coordinator ~~assistants~~.
14 The Nursing Coordinator and Assistant Nursing Coordinator
15 ~~assistants~~ shall be registered professional nurses licensed in
16 this State who have ~~and~~ graduated from an approved school
17 ~~schools~~ of nursing and ~~each shall have been actively engaged in~~
18 ~~nursing education not less than one year prior to appointment.~~
19 ~~The Nursing Act Coordinator shall hold at least a master's~~
20 ~~degree in nursing from an~~ accredited ~~approved~~ college or
21 university ~~and shall have at least 5 years experience since~~
22 ~~graduation in progressively responsible positions in nursing~~
23 ~~education. Each assistant shall hold at least a master's degree~~
24 ~~in nursing from an approved college or university and shall~~
25 ~~have at least 3 years experience since graduation in~~

1 ~~progressively responsible positions in nursing education. The~~
2 ~~Nursing Act Coordinator and assistants shall perform such~~
3 ~~administrative functions as may be delegated to them by the~~
4 ~~Director.~~

5 (Source: P.A. 90-742, eff. 8-13-98.)

6 (225 ILCS 65/50-65 new) (was 225 ILCS 65/10-25)

7 (Section scheduled to be repealed on January 1, 2008)

8 Sec. 50-65 ~~10-25~~. Board.

9 (a) The term of each member of the Board of Nursing and the
10 Advanced Practice Nursing Board serving before the effective
11 date of this amendatory Act of the 95th General Assembly shall
12 terminate on the effective date of this amendatory Act of the
13 95th General Assembly. Beginning on the effective date of this
14 amendatory Act of the 95th General Assembly, the Secretary ~~The~~
15 Director shall solicit recommendations from nursing
16 organizations and appoint the Board of Nursing, which
17 ~~beginning January 1, 2000,~~ shall consist of 13 members, one of
18 whom shall be a practical nurse; one of whom shall be a
19 practical nurse educator; one of whom shall be a registered
20 professional nurse in practice; one of whom shall be an
21 associate degree nurse educator; one of whom shall be a
22 baccalaureate degree nurse educator; one of whom shall be a
23 nurse who is actively engaged in direct care; one of whom shall
24 be a registered professional nurse actively engaged in direct
25 care; one of whom shall be a nursing administrator; 4 of whom

1 shall be advanced practice nurses representing CNS, CNP, CNM,
2 and CRNA practice; and one of whom shall be a public member who
3 is not employed in and has no material interest in any health
4 care field. The Board shall receive actual and necessary
5 expenses incurred in the performance of their duties.

6 Members of the Board of Nursing and the Advanced Practice
7 Nursing Board whose terms were terminated by this amendatory
8 Act of the 95th General Assembly shall be considered for
9 membership positions on the Board.

10 All nursing members of the Board must be (i) residents of
11 this State, (ii) licensed in good standing to practice nursing
12 in this State, (iii) graduates of an approved nursing program,
13 with a minimum of 5 years experience in the field of nursing,
14 and (iv) at the time of appointment to the Board, actively
15 engaged in nursing or work related to nursing.

16 Membership terms shall be for 3 years, except that in
17 making initial appointments, the Secretary shall appoint all
18 members for initial terms of 2, 3, and 4 years and these terms
19 shall be staggered as follows: 3 shall be appointed for terms
20 of 2 years; 4 shall be appointed for terms of 3 years; and 6
21 shall be appointed for terms of 4 years. No member shall be
22 appointed to more than 2 consecutive terms. In the case of a
23 vacated position, an individual may be appointed to serve the
24 unexpired portion of that term; if the term is less than half
25 of a full term, the individual is eligible to serve 2 full
26 terms. ~~be composed of 7 registered professional nurses, 2~~

1 ~~licensed practical nurses and one public member who shall also~~
2 ~~be a voting member and who is not a licensed health care~~
3 ~~provider. Two registered nurses shall hold at least a master's~~
4 ~~degree in nursing and be educators in professional nursing~~
5 ~~programs, one representing baccalaureate nursing education,~~
6 ~~one representing associate degree nursing education; one~~
7 ~~registered nurse shall hold at least a bachelor's degree with a~~
8 ~~major in nursing and be an educator in a licensed practical~~
9 ~~nursing program; one registered nurse shall hold a master's~~
10 ~~degree in nursing and shall represent nursing service~~
11 ~~administration; 2 registered nurses shall represent clinical~~
12 ~~nursing practice, one of whom shall have at least a master's~~
13 ~~degree in nursing; and, until January 1, 2000, 2 registered~~
14 ~~nurses shall represent advanced specialty practice. Each of the~~
15 ~~nurses shall have had a minimum of 5 years experience in~~
16 ~~nursing, 3 of which shall be in the area they represent on the~~
17 ~~Board and be actively engaged in the area of nursing they~~
18 ~~represent at the time of appointment and during their tenure on~~
19 ~~the Board. Members shall be appointed for a term of 3 years. No~~
20 ~~member shall be eligible for appointment to more than 2~~
21 ~~consecutive terms and any appointment to fill a vacancy shall~~
22 ~~be for the unexpired portion of the term. In making Board~~
23 ~~appointments, the Director shall give consideration to~~
24 ~~recommendations submitted by nursing organizations.~~
25 ~~Consideration shall be given to equal geographic~~
26 ~~representation. The Board shall receive actual and necessary~~

1 ~~expenses incurred in the performance of their duties.~~

2 ~~In making the initial appointments, the Director shall~~
3 ~~appoint all new members for terms of 2, 3, and 4 years and such~~
4 ~~terms shall be staggered as follows: 3 shall be appointed for~~
5 ~~terms of 2 years; 3 shall be appointed for terms of 3 years;~~
6 ~~and 3 shall be appointed for terms of 4 years.~~

7 The Secretary ~~Director~~ may remove any member of the Board
8 for misconduct, incapacity, or neglect of duty. The Secretary
9 ~~Director~~ shall reduce to writing any causes for removal.

10 The Board shall meet annually to elect a chairperson and
11 vice chairperson. The Board shall ~~may~~ hold regularly scheduled
12 ~~such other~~ meetings during the year ~~as may be necessary to~~
13 ~~conduct its business.~~ A simple majority ~~Six voting members~~ of
14 the Board shall constitute a quorum at any meeting. Any action
15 taken by the Board must be on the affirmative vote of a simple
16 majority of 6 members. Voting by proxy shall not be permitted.
17 In the case of an emergency where all Board members cannot meet
18 in person, the Board may convene a meeting via an electronic
19 format in accordance with the Open Meetings Act.

20 ~~The Board shall submit an annual report to the Director.~~

21 ~~The members of the Board shall be immune from suit in any~~
22 ~~action based upon any disciplinary proceedings or other acts~~
23 ~~performed in good faith as members of the Board.~~

24 (b) The Board may perform each of the following activities
25 ~~is authorized to:~~

26 (1) Recommend to the Department ~~recommend~~ the adoption

1 and, ~~from time to time,~~ the revision of ~~such~~ rules ~~that may~~
2 ~~be necessary~~ for the administration to carry out the
3 ~~provisions~~ of this Act;

4 ~~(2) conduct hearings and disciplinary conferences upon~~
5 ~~charges calling for discipline of a licensee as provided in~~
6 ~~Section 10-45;~~

7 ~~(3) report to the Department, upon completion of a~~
8 ~~hearing, the disciplinary actions recommended to be taken~~
9 ~~against persons violating this Act;~~

10 (2) Recommend ~~(4) recommend~~ the approval, denial of
11 approval, withdrawal of approval, or discipline of nursing
12 education programs;

13 ~~(5) participate in a national organization of state~~
14 ~~boards of nursing; and~~

15 ~~(6) recommend a list of the registered nurses to serve~~
16 ~~as Nursing Act Coordinator and Assistant Nursing Act~~
17 ~~Coordinator, respectively.~~

18 (c) The Board shall participate in disciplinary
19 conferences and hearings and make recommendations to the
20 Department regarding disciplinary action taken against a
21 licensee as provided under this Act. Disciplinary conference
22 hearings and proceedings regarding scope of practice issues
23 shall be conducted by a Board member at the same or higher
24 licensure level as the respondent. Participation in an informal
25 conference shall not bar members of the Board from future
26 participation or decisions relating to that matter.

1 (d) With the exception of emergency rules, any proposed
2 rules, amendments, second notice materials, and adopted rule or
3 amendment materials or policy statements concerning advanced
4 practice nurses shall be presented to the Medical Licensing
5 Board for review and comment. The recommendations of both the
6 Board of Nursing and the Medical Licensing Board shall be
7 presented to the Secretary for consideration in making final
8 decisions. Whenever the Board of Nursing and Medical Licensing
9 Board disagree on a proposed rule or policy, the Secretary
10 shall convene a joint meeting of the officers of each Board to
11 discuss resolution of any disagreements.

12 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98;
13 91-414, eff. 8-6-99.)

14 (225 ILCS 65/50-70 new) (was 225 ILCS 65/10-35)

15 (Section scheduled to be repealed on January 1, 2008)

16 Sec. 50-70 ~~10-35~~. Concurrent theory and clinical practice
17 education requirements of this Act. The educational
18 requirements of Sections 55-10 and 60-10 of this Act ~~Section~~
19 ~~10-30~~ relating to registered professional nursing and licensed
20 practical nursing shall not be deemed to have been satisfied by
21 the completion of any correspondence course or any program of
22 nursing that does not require coordinated or concurrent theory
23 and clinical practice. The Department may, upon recommendation
24 of the Board, grant an Illinois license to those applicants who
25 have received advanced graduate degrees in nursing from an

1 approved program with concurrent theory and clinical practice
2 or to those applicants who are currently licensed in another
3 state and have been actively practicing clinical nursing for a
4 minimum of 2 years.

5 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98;
6 91-43, eff. 1-1-00.)

7 (225 ILCS 65/50-75 new)

8 Sec. 50-75. Nursing delegation.

9 (a) For the purposes of this Section:

10 "Delegation" means transferring to an individual the
11 authority to perform a selected nursing activity or task, in a
12 selected situation.

13 "Nursing activity" means any work requiring the use of
14 knowledge acquired by completion of an approved program for
15 licensure, including advanced education, continuing education,
16 and experience as a licensed practical nurse or professional
17 nurse, as defined by the Department by rule.

18 "Task" means work not requiring nursing knowledge,
19 judgment, or decision-making, as defined by the Department by
20 rule.

21 (b) Nursing shall be practiced by licensed practical
22 nurses, registered professional nurses, and advanced practice
23 nurses. In the delivery of nursing care, nurses work with many
24 other licensed professionals and other persons. An advanced
25 practice nurse may delegate to registered professional nurses,

1 licensed practical nurses, and others persons.

2 (c) A registered professional nurse shall not delegate any
3 nursing activity requiring the specialized knowledge,
4 judgment, and skill of a licensed nurse to an unlicensed
5 person, including medication administration. A registered
6 professional nurse may delegate nursing activities to other
7 registered professional nurses or licensed practical nurses.

8 A registered nurse may delegate tasks to other licensed and
9 unlicensed persons. A licensed practical nurse who has been
10 delegated a nursing activity shall not re-delegate the nursing
11 activity. A registered professional nurse or advanced practice
12 nurse retains the right to refuse to delegate or to stop or
13 rescind a previously authorized delegation.

14 (225 ILCS 65/Art. 55 heading new) (was 225 ILCS 65/Tit.
15 10 heading)

16 ARTICLE 55 ~~TITLE 10~~. NURSING LICENSURE-LICENSED PRACTICAL

17 NURSES REGISTERED NURSES

18 AND LICENSED PRACTICAL NURSES

19 (225 ILCS 65/55-5 new)

20 Sec. 55-5. LPN education program requirements.

21 (a) All Illinois practical nurse education programs must be
22 reviewed by the Board and approved by the Department before the
23 successful completion of such a program may be applied toward
24 meeting the requirements for practical nurse licensure under

1 this Act. Any program changing the level of educational
2 preparation or the relationship with or to the parent
3 institution or establishing an extension of an existing program
4 must request a review by the Board and approval by the
5 Department. The Board shall review and make a recommendation
6 for the approval or disapproval of a program by the Department
7 based on the following criteria:

8 (1) a feasibility study that describes the need for the
9 program and the facilities used, the potential of the
10 program to recruit faculty and students, financial support
11 for the program, and other criteria, as established by
12 rule;

13 (2) program curriculum that meets all State
14 requirements;

15 (3) the administration of the program by a Nurse
16 Administrator and the involvement of a Nurse Administrator
17 in the development of the program; and

18 (4) the occurrence of a site visit prior to approval.

19 (b) In order to obtain initial Department approval and to
20 maintain Department approval, a practical nursing program must
21 meet all of the following requirements:

22 (1) The program must continually be administered by a
23 Nurse Administrator.

24 (2) The institution responsible for conducting the
25 program and the Nurse Administrator must ensure that
26 individual faculty members are academically and

1 professionally competent.

2 (3) The program curriculum must contain all applicable
3 requirements established by rule, including both theory
4 and clinical components.

5 (4) The passage rates of the program's graduating
6 classes on the State-approved licensure exam must be deemed
7 satisfactory by the Department.

8 (c) Program site visits to an institution conducting or
9 hosting a practical nursing program may be made at the
10 discretion of the Nursing Coordinator or upon recommendation of
11 the Board.

12 (d) Any institution conducting a practical nursing program
13 that wishes to discontinue the program must do each of the
14 following:

15 (1) Notify the Department, in writing, of its intent to
16 discontinue the program.

17 (2) Continue to meet the requirements of this Act and
18 the rules adopted thereunder until the official date of
19 termination of the program.

20 (3) Notify the Department of the date on which the last
21 student shall graduate from the program and the program
22 shall terminate.

23 (4) Assist remaining students in the continuation of
24 their education in the event of program termination prior
25 to the graduation of the program's final student.

26 (5) Upon the closure of the program, notify the

1 Department, in writing, of the location of student and
2 graduate records storage.

3 (225 ILCS 65/55-10 new) (was 225 ILCS 65/10-30)

4 (Section scheduled to be repealed on January 1, 2008)

5 Sec. 55-10 ~~10-30~~. Qualifications for LPN licensure.

6 (a) Each applicant who successfully meets the requirements
7 of this Section shall be entitled to licensure as a ~~Registered~~
8 ~~Nurse or~~ Licensed Practical Nurse, ~~whichever is applicable.~~

9 (b) An applicant for licensure by examination to practice
10 as a ~~registered nurse or licensed~~ practical nurse must do each
11 of the following shall:

12 (1) Submit ~~submit~~ a completed written application, on
13 forms provided by the Department and fees as established by
14 the Department. ~~;~~

15 (2) Have graduated from a practical nursing education
16 program approved by the Department or have been granted a
17 certificate of completion of pre-licensure requirements
18 from another United States jurisdiction.

19 (3) Successfully complete a licensure examination
20 approved by the Department. ~~for registered nurse~~
21 ~~licensure, have graduated from a professional nursing~~
22 ~~education program approved by the Department;~~

23 ~~(2.5) for licensed practical nurse licensure, have~~
24 ~~graduated from a practical nursing education program~~
25 ~~approved by the Department;~~

1 (4) Have ~~(3) have~~ not violated the provisions of
2 ~~Section 10-45~~ of this Act concerning the grounds for
3 disciplinary action. The Department may take into
4 consideration any felony conviction of the applicant, but
5 such a conviction shall not operate as an absolute bar to
6 licensure.†

7 (5) Submit to the criminal history records check
8 required under Section 50-35 of this Act.

9 ~~(4) meet all other requirements as established by rule;~~

10 (6) Submit ~~(5) pay~~, either to the Department or its
11 designated testing service, a fee covering the cost of
12 providing the examination. Failure to appear for the
13 examination on the scheduled date at the time and place
14 specified after the applicant's application for
15 examination has been received and acknowledged by the
16 Department or the designated testing service shall result
17 in the forfeiture of the examination fee.

18 (7) Meet all other requirements established by rule.

19 An applicant for licensure by examination may take the
20 Department-approved examination in another jurisdiction.

21 (b) If an applicant for licensure by examination neglects,
22 fails, or refuses to take an examination or fails to pass an
23 examination for a license under this Act within 3 years after
24 filing the application, regardless of the jurisdiction in which
25 the examination was taken, the application shall be denied.
26 However, the applicant may make a new application accompanied

1 by the required fee and provide evidence of meeting the
2 requirements in force at the time of the new application.

3 An applicant may take and successfully complete a
4 Department-approved examination in another jurisdiction.
5 However, an applicant who has never been licensed previously in
6 any jurisdiction that utilizes a Department-approved
7 examination and who has taken and failed to pass the
8 examination within 3 years after filing the application must
9 submit proof of successful completion of a
10 Department-authorized nursing education program or
11 recompletion of an approved registered nursing program or
12 licensed practical nursing program, as appropriate, prior to
13 re-application.

14 (c) An applicant for licensure by examination shall have
15 one year from the date of notification of successful completion
16 of the examination to apply to the Department for a license. If
17 an applicant fails to apply within one year, the applicant
18 shall be required to retake ~~again take~~ and pass the examination
19 unless licensed in another jurisdiction of the United States
20 ~~within one year of passing the examination.~~

21 (d) A licensed practical nurse applicant who passes the
22 Department-approved licensure examination and has applied to
23 the Department for licensure may obtain employment as a
24 license-pending practical nurse and practice as delegated by a
25 registered professional nurse or an advanced practice nurse or
26 physician. An individual may be employed as a license-pending

1 practical nurse if all of the following criteria are met:

2 (1) He or she has completed and passed the
3 Department-approved licensure exam and presents to the
4 employer the official written notification indicating
5 successful passage of the licensure examination.

6 (2) He or she has competed and submitted to the
7 Department an application for licensure under this Section
8 as a practical nurse.

9 (3) He or she has submitted the required licensure fee.

10 (4) He or she has met all other requirements
11 established by rule, including having submitted to a
12 criminal history records check.

13 (e) The privilege to practice as a license-pending
14 practical nurse shall terminate with the occurrence of any of
15 the following:

16 (1) Three months have passed since the official date of
17 passing the licensure exam as inscribed on the formal
18 written notification indicating passage of the exam. This
19 3-month period may be extended as determined by rule.

20 (2) Receipt of the practical nurse license from the
21 Department.

22 (3) Notification from the Department that the
23 application for licensure has been denied.

24 (4) A request by the Department that the individual
25 terminate practicing as a license-pending practical nurse
26 until an official decision is made by the Department to

1 grant or deny a practical nurse license.

2 (f) ~~(e)~~ An applicant for licensure by endorsement who is a
3 ~~registered professional nurse or a~~ licensed practical nurse
4 licensed by examination under the laws of another state or
5 territory of the United States or a foreign country,
6 jurisdiction, territory, or province must do each of the
7 following shall:

8 (1) Submit ~~submit~~ a completed written application, on
9 forms supplied by the Department, and fees as established
10 by the Department. ~~;~~

11 (2) Have graduated from a practice nursing education
12 program approved by the Department. ~~for registered nurse~~
13 ~~licensure, have graduated from a professional nursing~~
14 ~~education program approved by the Department;~~

15 ~~(2.5) for licensed practical nurse licensure, have~~
16 ~~graduated from a practical nursing education program~~
17 ~~approved by the Department;~~

18 (3) Submit ~~submit~~ verification of licensure status
19 directly from the United States jurisdiction of licensure,
20 if applicable, as defined by rule. ~~;~~

21 (4) Submit to the criminal history records check
22 required under Section 50-35 of this Act. ~~have passed the~~
23 ~~examination authorized by the Department;~~

24 (5) Meet ~~meet~~ all other requirements as established by
25 the Department by rule.

26 (g) ~~(d)~~ All applicants for practical ~~registered~~ nurse

1 licensure by examination or endorsement ~~pursuant to item (2) of~~
2 ~~subsection (b) and item (2) of subsection (c) of this Section~~
3 who are graduates of nursing educational programs in a country
4 other than the United States or its territories shall have
5 their nursing education credentials evaluated by a
6 Department-approved nursing credentialing evaluation service.
7 No such applicant may be issued a license under this Act unless
8 the applicant's program is deemed by the nursing credentialing
9 evaluation service to be equivalent to a professional nursing
10 education program approved by the Department. An applicant who
11 has graduated from a nursing educational program outside of the
12 United States or its territories and whose first language is
13 not English shall submit certification of passage of the Test
14 of English as a Foreign Language (TOEFL), as defined by rule.
15 The Department may, upon recommendation from the nursing
16 evaluation service, waive the requirement that the applicant
17 pass the TOEFL examination if the applicant submits
18 verification of the successful completion of a nursing
19 education program conducted in English. The requirements of
20 this subsection (d) may be satisfied by the showing of proof of
21 a certificate from the Certificate Program or the VisaScreen
22 Program of the Commission on Graduates of Foreign Nursing
23 Schools.

24 (h) ~~(d-5)~~ An applicant licensed in another state or
25 territory who is applying for licensure and has received her or
26 his education in a country other than the United States or its

1 territories shall have her or his nursing education credentials
2 evaluated by a Department-approved nursing credentialing
3 evaluation service. No such applicant may be issued a license
4 under this Act unless the applicant's program is deemed by the
5 nursing credentialing evaluation service to be equivalent to a
6 professional nursing education program approved by the
7 Department. An applicant who has graduated from a nursing
8 educational program outside of the United States or its
9 territories and whose first language is not English shall
10 submit certification of passage of the Test of English as a
11 Foreign Language (TOEFL), as defined by rule. The Department
12 may, upon recommendation from the nursing evaluation service,
13 waive the requirement that the applicant pass the TOEFL
14 examination if the applicant submits verification of the
15 successful completion of a nursing education program conducted
16 in English or the successful passage of an approved licensing
17 examination given in English. The requirements of this
18 subsection (d-5) may be satisfied by the showing of proof of a
19 certificate from the Certificate Program or the VisaScreen
20 Program of the Commission on Graduates of Foreign Nursing
21 Schools.

22 ~~(e) (Blank).~~

23 (i) A ~~(f) Pending the issuance of a license under~~
24 ~~subsection (e) of this Section, the Department may grant an~~
25 ~~applicant a temporary license to practice nursing as a~~
26 ~~registered nurse or as a licensed practical nurse who if the~~

1 ~~Department is satisfied that the applicant~~ holds an ~~active,~~
2 unencumbered license in good standing in another United States
3 jurisdiction and who has applied for practical nurse licensure
4 under this Act by endorsement may be issued a temporary
5 license, if satisfactory proof of such licensure in another
6 jurisdiction is presented to the Department. ~~The~~ ~~If the~~
7 ~~applicant holds more than one current active license, or one or~~
8 ~~more active temporary licenses from other jurisdictions, the~~
9 Department shall not issue an applicant a temporary practical
10 nurse license until it is satisfied that the applicant holds an
11 each current active, ~~license held by the applicant is~~
12 unencumbered license in good standing in another jurisdiction.
13 If the applicant holds more than one current active license or
14 one or more active temporary licenses from another
15 jurisdiction, the Department may not issue a temporary license
16 until the Department is satisfied that each current active
17 license held by the applicant is unencumbered. The temporary
18 license, which shall be issued no later than 14 working days
19 following receipt by the Department of an application for the
20 temporary license, shall be granted upon the submission of all
21 of the following to the Department:

22 (1) ~~A a signed and completed application for licensure~~
23 ~~under subsection (a) of this Section as a registered nurse~~
24 ~~or a licensed practical nurse.~~

25 (2) Proof ~~proof~~ of a current, active license in at
26 least one other jurisdiction of the United States and proof

1 that each current active license or temporary license held
2 by the applicant within the last 5 years is unencumbered. ~~+~~

3 (3) A ~~a~~ signed and completed application for a
4 temporary license. ~~;~~ and

5 (4) The ~~the~~ required temporary license fee.

6 (j) ~~(g)~~ The Department may refuse to issue an applicant a
7 temporary license authorized pursuant to this Section if,
8 within 14 working days following its receipt of an application
9 for a temporary license, the Department determines that:

10 (1) the applicant has been convicted of a crime under
11 the laws of a jurisdiction of the United States that is:

12 (i) ~~which is~~ a felony; or (ii) ~~which is~~ a misdemeanor
13 directly related to the practice of the profession, within
14 the last 5 years;

15 (2) ~~within the last 5 years~~ the applicant has had a
16 license or permit related to the practice of practical
17 nursing revoked, suspended, or placed on probation by
18 another jurisdiction within the last 5 years and, ~~if~~ at
19 least one of the grounds for revoking, suspending, or
20 placing on probation is the same or substantially
21 equivalent to grounds in Illinois; or

22 (3) the Department ~~it~~ intends to deny licensure by
23 endorsement.

24 ~~For purposes of this Section, an "unencumbered license"~~
25 ~~means a license against which no disciplinary action has been~~
26 ~~taken or is pending and for which all fees and charges are paid~~

1 ~~and current.~~

2 (k) ~~(h)~~ The Department may revoke a temporary license
3 issued pursuant to this Section if it determines any of the
4 following:

5 (1) That ~~it determines that~~ the applicant has been
6 convicted of a crime under the law of any jurisdiction of
7 the United States that is (i) a felony or (ii) a
8 misdemeanor directly related to the practice of the
9 profession, within the last 5 years. ~~†~~

10 (2) That ~~it determines that~~ within the last 5 years the
11 applicant has had a license or permit related to the
12 practice of nursing revoked, suspended, or placed on
13 probation by another jurisdiction, and if at least one of
14 the grounds for revoking, suspending, or placing on
15 probation is the same or substantially equivalent to
16 grounds for disciplinary action under this Act. ~~in~~
17 ~~Illinois; or~~

18 (3) That the Department ~~it determines that it~~ intends
19 to deny licensure by endorsement.

20 (l) A temporary license shall expire 6 months from the date
21 of issuance. Further renewal may be granted by the Department
22 in hardship cases, as defined by rule and upon approval of the
23 Secretary ~~Director~~. However, a temporary license shall
24 automatically expire upon issuance of a valid ~~the Illinois~~
25 license under this Act or upon notification that the Department
26 intends to deny licensure, whichever occurs first.

1 (m) All applicants for practical nurse licensure ~~(i)~~
2 ~~Applicants~~ have 3 years from the date of application to
3 complete the application process. If the process has not been
4 completed within 3 years from the date of application, the
5 application shall be denied, the fee forfeited, and the
6 applicant must reapply and meet the requirements in effect at
7 the time of reapplication.

8 (Source: P.A. 94-352, eff. 7-28-05; 94-932, eff. 1-1-07.)

9 (225 ILCS 65/55-15 new)

10 Sec. 55-15. LPN license expiration; renewal. The
11 expiration date and renewal period for each license to practice
12 practical nursing issued under this Act shall be set by rule.
13 The holder of a license may renew the license during the month
14 preceding the expiration date of the license by paying the
15 required fee. It is the responsibility of the licensee to
16 notify the Department in writing of a change of address.

17 (225 ILCS 65/55-20 new)

18 Sec. 55-20. Restoration of LPN license; temporary permit.

19 (a) Any license to practice practical nursing issued under
20 this Act that has expired or that is on inactive status may be
21 restored by making application to the Department and filing
22 proof of fitness acceptable to the Department, as specified by
23 rule, to have the license restored, and by paying the required
24 restoration fee. Such proof of fitness may include evidence

1 certifying active lawful practice in another jurisdiction.

2 (b) A practical nurse licensee seeking restoration of a
3 license after it has expired or been placed on inactive status
4 for more than 5 years shall file an application, on forms
5 supplied by the Department, and submit the restoration or
6 renewal fees set forth by the Department. The licensee must
7 also submit proof of fitness to practice, including one of the
8 following:

9 (1) certification of active practice in another
10 jurisdiction, which may include a statement from the
11 appropriate board or licensing authority in the other
12 jurisdiction that the licensee was authorized to practice
13 during the term of said active practice;

14 (2) proof of the successful completion of a
15 Department-approved licensure examination; or

16 (3) an affidavit attesting to military service as
17 provided in subsection (c) of this Section; however, if
18 application is made within 2 years after discharge and if
19 all other provisions of subsection (c) of this Section are
20 satisfied, the applicant shall be required to pay the
21 current renewal fee.

22 (c) Notwithstanding any other provision of this Act, any
23 license to practice practical nursing issued under this Act
24 that expired while the licensee was (i) in federal service on
25 active duty with the Armed Forces of the United States or in
26 the State Militia and called into service or training or (ii)

1 in training or education under the supervision of the United
2 States preliminary to induction into the military service may
3 have the license restored without paying any lapsed renewal
4 fees if, within 2 years after honorable termination of such
5 service, training, or education, the applicant furnishes the
6 Department with satisfactory evidence to the effect that the
7 applicant has been so engaged and that the individual's
8 service, training, or education has been so terminated.

9 (d) Any practical nurse licensee who shall engage in the
10 practice of practical nursing with a lapsed license or while on
11 inactive status shall be considered to be practicing without a
12 license, which shall be grounds for discipline under Section
13 70-5 of this Act.

14 (e) Pending restoration of a license under this Section,
15 the Department may grant an applicant a temporary permit to
16 practice as a practical nurse if the Department is satisfied
17 that the applicant holds an active, unencumbered license in
18 good standing in another jurisdiction. If the applicant holds
19 more than one current active license or one or more active
20 temporary licenses from another jurisdiction, the Department
21 shall not issue a temporary permit until it is satisfied that
22 each current active license held by the applicant is
23 unencumbered. The temporary permit, which shall be issued no
24 later than 14 working days after receipt by the Department of
25 an application for the permit, shall be granted upon the
26 submission of all of the following to the Department:

1 (1) A signed and completed application for restoration
2 of licensure under this Section as a licensed practical
3 nurse.

4 (2) Proof of (i) a current, active license in at least
5 one other jurisdiction and proof that each current, active
6 license or temporary permit held by the applicant is
7 unencumbered or (ii) fitness to practice nursing in this
8 State, as specified by rule.

9 (3) A signed and completed application for a temporary
10 permit.

11 (4) The required permit fee.

12 (f) The Department may refuse to issue to an applicant a
13 temporary permit authorized under this Section if, within 14
14 working days after its receipt of an application for a
15 temporary permit, the Department determines that:

16 (1) the applicant has been convicted within the last 5
17 years of any crime under the laws of any jurisdiction of
18 the United States that is (i) a felony or (ii) a
19 misdemeanor directly related to the practice of the
20 profession;

21 (2) within the last 5 years, the applicant has had a
22 license or permit related to the practice of nursing
23 revoked, suspended, or placed on probation by another
24 jurisdiction, if at least one of the grounds for revoking,
25 suspending, or placing on probation is the same or
26 substantially equivalent to grounds for disciplinary

1 action under this Act; or

2 (3) the Department intends to deny restoration of the
3 license.

4 (g) The Department may revoke a temporary permit issued
5 under this Section if:

6 (1) the Department determines that the applicant has
7 been convicted within the last 5 years of any crime under
8 the laws of any jurisdiction of the United States that is
9 (i) a felony or (ii) a misdemeanor directly related to the
10 practice of the profession;

11 (2) within the last 5 years, the applicant had a
12 license or permit related to the practice of nursing
13 revoked, suspended, or placed on probation by another
14 jurisdiction and at least one of the grounds for revoking,
15 suspending, or placing on probation is the same or
16 substantially equivalent to grounds for disciplinary
17 action under this Act; or

18 (3) the Department intends to deny restoration of the
19 license.

20 (h) A temporary permit or renewed temporary permit shall
21 expire (i) upon issuance of a valid license under this Act or
22 (ii) upon notification that the Department intends to deny
23 restoration of licensure. Except as otherwise provided in this
24 Section, the temporary permit shall expire 6 months after the
25 date of issuance. Further renewal may be granted by the
26 Department in hardship cases that shall automatically expire

1 upon issuance of a valid license under this Act or upon
2 notification that the Department intends to deny licensure,
3 whichever occurs first. No extensions shall be granted beyond
4 the 6-month period, unless approved by the Secretary.
5 Notification by the Department under this Section must be by
6 certified or registered mail.

7 (225 ILCS 65/55-25 new)

8 Sec. 55-25. Inactive status of a LPN license. Any licensed
9 practical nurse who notifies the Department in writing on forms
10 prescribed by the Department may elect to place his or her
11 license on inactive status and shall, subject to rules of the
12 Department, be excused from payment of renewal fees until
13 notice is given to the Department, in writing, of his or her
14 intent to restore the license.

15 Any practical nurse requesting restoration from inactive
16 status shall be required to pay the current renewal fee and
17 shall be required to restore his or her license, as provided by
18 rule of the Department.

19 Any practical nurse whose license is on an inactive status
20 shall not practice nursing as defined by this Act in the State
21 of Illinois.

22 (225 ILCS 65/55-30 new)

23 Sec. 55-30. LPN scope of practice.

24 (a) Practice as a licensed practical nurse means a scope of

1 basic nursing practice, with or without compensation, as
2 delegated by a registered professional nurse or an advanced
3 practice nurse or as directed by a physician assistant,
4 physician, dentist, or podiatrist, and includes, but is not
5 limited to, all of the following:

6 (1) Collaborating in the collection of data that
7 contributes to the assessment of the health status of a
8 patient.

9 (2) Collaborating in the development and modification
10 of the registered professional nurse's or advanced
11 practice nurse's comprehensive nursing plan of care for all
12 types of patients.

13 (3) Implementing aspects of the plan of care as
14 delegated.

15 (4) Participating in health teaching and counseling to
16 promote, attain, and maintain the optimum health level of
17 patients, as delegated.

18 (5) Serving as an advocate for the patient by
19 communicating and collaborating with other health service
20 personnel, as delegated.

21 (6) Participating in the evaluation of patient
22 responses to interventions.

23 (7) Communicating and collaborating with other health
24 care professionals as delegated.

25 (8) Providing input into the development of policies
26 and procedures to support patient safety.

1 (225 ILCS 65/55-35 new)

2 Sec. 55-35. Continuing education for LPN licensees. The
3 Department may adopt rules of continuing education for licensed
4 practical nurses that require 20 hours of continuing education
5 per 2-year license renewal cycle. The rules shall address
6 variances in part or in whole for good cause, including without
7 limitation illness or hardship. The continuing education rules
8 must ensure that licensees are given the opportunity to
9 participate in programs sponsored by or through their State or
10 national professional associations, hospitals, or other
11 providers of continuing education. Each licensee is
12 responsible for maintaining records of completion of
13 continuing education and shall be prepared to produce the
14 records when requested by the Department.

15 (225 ILCS 65/Art. 60 heading new)

16 ARTICLE 60. NURSING LICENSURE-RN

17 (225 ILCS 65/60-5 new)

18 Sec. 60-5. RN education program requirements; out-of-State
19 programs.

20 (a) All registered professional nurse education programs
21 must be reviewed by the Board and approved by the Department
22 before the successful completion of such a program may be
23 applied toward meeting the requirements for registered

1 professional nurse licensure under this Act. Any program
2 changing the level of educational preparation or the
3 relationship with or to the parent institution or establishing
4 an extension of an existing program must request a review by
5 the Board and approval by the Department. The Board shall
6 review and make a recommendation for the approval or
7 disapproval of a program by the Department based on the
8 following criteria:

9 (1) a feasibility study that describes the need for the
10 program and the facilities used, the potential of the
11 program to recruit faculty and students, financial support
12 for the program, and other criteria, as established by
13 rule;

14 (2) program curriculum that meets all State
15 requirements;

16 (3) the administration of the program by a Nurse
17 Administrator and the involvement of a Nurse Administrator
18 in the development of the program; and

19 (4) the occurrence of a site visit prior to approval.

20 (b) In order to obtain initial Department approval and to
21 maintain Department approval, a registered professional
22 nursing program must meet all of the following requirements:

23 (1) The institution responsible for conducting the
24 program and the Nurse Administrator must ensure that
25 individual faculty members are academically and
26 professionally competent.

1 (2) The program curriculum must contain all applicable
2 requirements established by rule, including both theory
3 and clinical components.

4 (3) The passage rates of the program's graduating
5 classes on the State-approved licensure exam must be deemed
6 satisfactory by the Department.

7 (c) Program site visits to an institution conducting or
8 hosting a professional nursing program may be made at the
9 discretion of the Nursing Coordinator or upon recommendation of
10 the Board. Full routine site visits shall be conducted by the
11 Department for periodic evaluation. The visits shall be used to
12 determine compliance with this Act. Full routine site visits
13 must be announced and may be waived at the discretion of the
14 Department if the program maintains accreditation with the
15 National League for Nursing Accrediting Commission (NLNAC) or
16 the Commission on Collegiate Nursing Education (CCNE).

17 (d) Any institution conducting a registered professional
18 nursing program that wishes to discontinue the program must do
19 each of the following:

20 (1) Notify the Department, in writing, of its intent to
21 discontinue the program.

22 (2) Continue to meet the requirements of this Act and
23 the rules adopted thereunder until the official date of
24 termination of the program.

25 (3) Notify the Department of the date on which the last
26 student shall graduate from the program and the program

1 shall terminate.

2 (4) Assist remaining students in the continuation of
3 their education in the event of program termination prior
4 to the graduation of the program's final student.

5 (5) Upon the closure of the program, notify the
6 Department, in writing, of the location of student and
7 graduate records' storage.

8 (e) Out-of-State registered professional nursing education
9 programs planning to offer clinical practice experiences in
10 this State must meet the requirements set forth in this Section
11 and must meet the clinical and faculty requirements for
12 institutions outside of this State, as established by rule. The
13 institution responsible for conducting an out-of-State
14 registered professional nursing education program and the
15 administrator of the program shall be responsible for ensuring
16 that the individual faculty and preceptors overseeing the
17 clinical experience are academically and professionally
18 competent.

19 (225 ILCS 65/60-10 new)

20 Sec. 60-10. Qualifications for RN licensure.

21 (a) Each applicant who successfully meets the requirements
22 of this Section shall be entitled to licensure as a registered
23 professional nurse.

24 (b) An applicant for licensure by examination to practice
25 as a registered professional nurse must do each of the

1 following:

2 (1) Submit a completed written application and fees, as
3 established by the Department.

4 (2) Have graduated from a professional nursing
5 education program approved by the Department or have been
6 granted a certificate of completion of pre-licensure
7 requirements from another United States jurisdiction.

8 (3) Successfully complete a licensure examination
9 approved by the Department.

10 (4) Have not violated the provisions of this Act
11 concerning the grounds for disciplinary action. The
12 Department may take into consideration any felony
13 conviction of the applicant, but such a conviction may not
14 operate as an absolute bar to licensure.

15 (5) Submit to the criminal history records check
16 required under Section 50-35 of this Act.

17 (6) Submit, either to the Department or its designated
18 testing service, a fee covering the cost of providing the
19 examination. Failure to appear for the examination on the
20 scheduled date at the time and place specified after the
21 applicant's application for examination has been received
22 and acknowledged by the Department or the designated
23 testing service shall result in the forfeiture of the
24 examination fee.

25 (7) Meet all other requirements established by the
26 Department by rule. An applicant for licensure by

1 examination may take the Department-approved examination
2 in another jurisdiction.

3 (b) If an applicant for licensure by examination neglects,
4 fails, or refuses to take an examination or fails to pass an
5 examination for a license upon graduation from a professional
6 nursing education program, regardless of the jurisdiction in
7 which the examination was written, the applicant shall not be
8 permitted to take the examination until the applicant provides
9 proof to the Department of the successful completion of at
10 least 2 additional years of professional nursing education.

11 (c) An applicant for licensure by examination shall have
12 one year after the date of notification of the successful
13 completion of the examination to apply to the Department for a
14 license. If an applicant fails to apply within one year, the
15 applicant shall be required to retake and pass the examination
16 unless licensed in another jurisdiction of the United States.

17 (d) An applicant for licensure by examination who passes
18 the Department-approved licensure examination for professional
19 nursing may obtain employment as a license-pending registered
20 nurse and practice under the direction of a registered
21 professional nurse or an advanced practice nurse until such
22 time as he or she receives his or her license to practice or
23 until the license is denied. In no instance shall any such
24 applicant practice or be employed in any management capacity.
25 An individual may be employed as a license-pending registered
26 nurse if all of the following criteria are met:

1 (1) He or she has completed and passed the
2 Department-approved licensure exam and presents to the
3 employer the official written notification indicating
4 successful passage of the licensure examination.

5 (2) He or she has completed and submitted to the
6 Department an application for licensure under this Section
7 as a registered professional nurse.

8 (3) He or she has submitted the required licensure fee.

9 (4) He or she has met all other requirements
10 established by rule, including having submitted to a
11 criminal history records check.

12 (e) The privilege to practice as a license-pending
13 registered nurse shall terminate with the occurrence of any of
14 the following:

15 (1) Three months have passed since the official date of
16 passing the licensure exam as inscribed on the formal
17 written notification indicating passage of the exam. The
18 3-month license pending period may be extended if more time
19 is needed by the Department to process the licensure
20 application.

21 (2) Receipt of the registered professional nurse
22 license from the Department.

23 (3) Notification from the Department that the
24 application for licensure has been refused.

25 (4) A request by the Department that the individual
26 terminate practicing as a license-pending registered nurse

1 until an official decision is made by the Department to
2 grant or deny a registered professional nurse license.

3 (f) An applicant for registered professional nurse
4 licensure by endorsement who is a registered professional nurse
5 licensed by examination under the laws of another state or
6 territory of the United States must do each of the following:

7 (1) Submit a completed written application, on forms
8 supplied by the Department, and fees as established by the
9 Department.

10 (2) Have graduated from a registered professional
11 nursing education program approved by the Department.

12 (3) Submit verification of licensure status directly
13 from the United States jurisdiction of licensure, if
14 applicable, as defined by rule.

15 (4) Submit to the criminal history records check
16 required under Section 50-35 of this Act.

17 (5) Meet all other requirements as established by the
18 Department by rule.

19 (g) Pending the issuance of a license under this Section,
20 the Department may grant an applicant a temporary license to
21 practice nursing as a registered professional nurse if the
22 Department is satisfied that the applicant holds an active,
23 unencumbered license in good standing in another U.S.
24 jurisdiction. If the applicant holds more than one current
25 active license or one or more active temporary licenses from
26 another jurisdiction, the Department may not issue a temporary

1 license until the Department is satisfied that each current
2 active license held by the applicant is unencumbered. The
3 temporary license, which shall be issued no later than 14
4 working days after receipt by the Department of an application
5 for the temporary license, shall be granted upon the submission
6 of all of the following to the Department:

7 (1) A completed application for licensure as a
8 registered professional nurse.

9 (2) Proof of a current, active license in at least one
10 other jurisdiction of the United States and proof that each
11 current active license or temporary license held by the
12 applicant within the last 5 years is unencumbered.

13 (3) A completed application for a temporary license.

14 (4) The required temporary license fee.

15 (h) The Department may refuse to issue an applicant a
16 temporary license authorized pursuant to this Section if,
17 within 14 working days after its receipt of an application for
18 a temporary license, the Department determines that:

19 (1) the applicant has been convicted of a crime under
20 the laws of a jurisdiction of the United States that is (i)
21 a felony or (ii) a misdemeanor directly related to the
22 practice of the profession, within the last 5 years;

23 (2) the applicant has had a license or permit related
24 to the practice of nursing revoked, suspended, or placed on
25 probation by another jurisdiction within the last 5 years,
26 if at least one of the grounds for revoking, suspending, or

1 placing on probation is the same or substantially
2 equivalent to grounds for disciplinary action under this
3 Act; or

4 (3) the Department intends to deny licensure by
5 endorsement.

6 (i) The Department may revoke a temporary license issued
7 pursuant to this Section if it determines any of the following:

8 (1) That the applicant has been convicted of a crime
9 under the laws of any jurisdiction of the United States
10 that is (i) a felony or (ii) a misdemeanor directly related
11 to the practice of the profession, within the last 5 years.

12 (2) That within the last 5 years, the applicant has had
13 a license or permit related to the practice of nursing
14 revoked, suspended, or placed on probation by another
15 jurisdiction, if at least one of the grounds for revoking,
16 suspending, or placing on probation is the same or
17 substantially equivalent to grounds for disciplinary
18 action under this Act.

19 (3) That it intends to deny licensure by endorsement.

20 (j) A temporary license issued under this Section shall
21 expire 6 months after the date of issuance. Further renewal may
22 be granted by the Department in hardship cases, as defined by
23 rule and upon approval of the Secretary. However, a temporary
24 license shall automatically expire upon issuance of the
25 Illinois license or upon notification that the Department
26 intends to deny licensure, whichever occurs first.

1 (k) All applicants for registered professional nurse
2 licensure have 2 years after the date of application to
3 complete the application process. If the process has not been
4 completed within 2 years after the date of application, the
5 application shall be denied, the fee forfeited, and the
6 applicant must reapply and meet the requirements in effect at
7 the time of reapplication.

8 (l) All applicants for registered nurse licensure by
9 examination or endorsement who are graduates of practical
10 nursing educational programs in a country other than the United
11 States and its territories shall have their nursing education
12 credentials evaluated by a Department-approved nursing
13 credentialing evaluation service. No such applicant may be
14 issued a license under this Act unless the applicant's program
15 is deemed by the nursing credentialing evaluation service to be
16 equivalent to a professional nursing education program
17 approved by the Department. An applicant who has graduated from
18 a nursing educational program outside of the United States or
19 its territories and whose first language is not English shall
20 submit certification of passage of the Test of English as a
21 Foreign Language (TOEFL), as defined by rule. The Department
22 may, upon recommendation from the nursing evaluation service,
23 waive the requirement that the applicant pass the TOEFL
24 examination if the applicant submits verification of the
25 successful completion of a nursing education program conducted
26 in English. The requirements of this subsection (l) may be

1 satisfied by the showing of proof of a certificate from the
2 Certificate Program or the VisaScreen Program of the Commission
3 on Graduates of Foreign Nursing Schools.

4 (m) An applicant licensed in another state or territory who
5 is applying for licensure and has received her or his education
6 in a country other than the United States or its territories
7 shall have her or his nursing education credentials evaluated
8 by a Department-approved nursing credentialing evaluation
9 service. No such applicant may be issued a license under this
10 Act unless the applicant's program is deemed by the nursing
11 credentialing evaluation service to be equivalent to a
12 professional nursing education program approved by the
13 Department. An applicant who has graduated from a nursing
14 educational program outside of the United States or its
15 territories and whose first language is not English shall
16 submit certification of passage of the Test of English as a
17 Foreign Language (TOEFL), as defined by rule. The Department
18 may, upon recommendation from the nursing evaluation service,
19 waive the requirement that the applicant pass the TOEFL
20 examination if the applicant submits verification of the
21 successful completion of a nursing education program conducted
22 in English or the successful passage of an approved licensing
23 examination given in English. The requirements of this
24 subsection (m) may be satisfied by the showing of proof of a
25 certificate from the Certificate Program or the VisaScreen
26 Program of the Commission on Graduates of Foreign Nursing

1 Schools.

2 (225 ILCS 65/60-15 new) (was 225 ILCS 65/10-37)

3 (Section scheduled to be repealed on January 1, 2008)

4 Sec. 60-15 ~~10-37~~. Registered nurse ~~Nurse~~ externship
5 permit.

6 (a) The Department shall establish a ~~2-year~~ program under
7 which the Department may issue a nurse externship permit to a
8 registered nurse who is licensed under the laws of another
9 state or territory of the United States and who has not taken
10 the National Council Licensure Examination (NCLEX). A nurse who
11 is issued a permit shall be allowed to practice as a nurse
12 extern under the direct, on-site supervision of a registered
13 professional nurse licensed under this Act. There shall be one
14 supervising registered professional nurse for every one nurse
15 extern.

16 (b) An applicant shall be qualified to receive a nurse
17 externship permit if that applicant:

18 (1) Has submitted a completed written application to
19 the Department, on forms provided by the Department, and
20 submitted ~~paid~~ any fees established by the Department.

21 (2) Has graduated from a professional nursing
22 education program approved by the Department.

23 (3) Is licensed as a professional nurse in another
24 state or territory of the United States and has submitted a
25 verification of active and unencumbered licensure in all of

1 the states and territories in which the applicant is
2 licensed.

3 (4) Has submitted verification of an offer of
4 employment in Illinois as a nurse extern. The Department
5 may prescribe the information necessary to determine if
6 this employment meets the requirements of the permit
7 program. This information shall include a copy of the
8 written employment offer.

9 (5) Has submitted a written statement from the
10 applicant's prospective employer stating that the
11 prospective employer agrees to pay the full tuition for the
12 Bilingual Nurse Consortium course or other course approved
13 by rule.

14 (6) Has submitted proof of taking the Test of English
15 as a Foreign Language (TOEFL) with a minimum score as set
16 by rule. Applicants with the highest TOEFL scores shall be
17 given first consideration to entrance into an extern
18 program.

19 (7) Has submitted written verification that the
20 applicant has been enrolled in the Bilingual Nurse
21 Consortium course or other course approved by rule. This
22 verification must state that the applicant shall be able to
23 complete the course within the year for which the permit is
24 issued.

25 (8) Has agreed to submit to the Department a mid-year
26 exam as determined by rule that demonstrates proficiency

1 towards passing the NCLEX.

2 (9) Has not violated the provisions of Section 70-5
3 ~~10-45~~ of this Act. The Department may take into
4 consideration any felony conviction of the applicant, but
5 such a conviction shall not operate as an absolute bar to
6 licensure.

7 (10) Has met all other requirements established by
8 rule.

9 (c) A nurse extern shall be issued no more than one permit
10 in a lifetime. The permit shall expire one calendar year after
11 it is issued. Before being issued a license under this Act, the
12 nurse extern must submit proof of the successful completion of
13 the Bilingual Nurse Consortium course or other course approved
14 by rule and successful passage of the NCLEX. The nurse extern
15 shall not practice autonomous, professional nursing until he or
16 she is licensed under this Act. The nurse extern shall carry
17 out progressive nursing skills under the direct supervision of
18 a registered nurse licensed under this Act and shall not be
19 employed in a supervisory capacity. The nurse extern shall work
20 only in the sponsoring facility. A nurse extern may work for a
21 period not to exceed one calendar year from the date of
22 issuance of the permit or until he or she fails the NCLEX.
23 While working as a nurse extern, the nurse extern is subject to
24 the provisions of this Act and all rules adopted by the
25 Department for the administration of this Act.

26 (d) The Secretary shall convene a task force ~~within 2~~

1 ~~months after the effective date of this amendatory Act of the~~
2 ~~94th General Assembly~~ to establish clinical guidelines that
3 allow for the gradual progression of nursing skills in
4 culturally diverse practice settings. The Nursing Act
5 Coordinator or his or her designee shall serve as chairperson
6 of the task force. The task force shall include, but not be
7 limited to, 2 representatives of the Illinois Nurses
8 Association, 2 representatives of the Illinois Hispanic Nurses
9 Association, a nurse engaged in nursing education who possesses
10 a master's degree or higher, one representative from the
11 Humboldt Park Vocational Educational Center, 2 registered
12 nurses from United States territories who each hold a current
13 State nursing license, one representative from the Chicago
14 Bilingual Nurse Consortium, and one member of the Illinois
15 Hospital Association. The task force shall complete this work
16 no longer than 4 months after convening. After the nurse
17 externship permit program has been in effect for 2 years, the
18 task force shall evaluate the effectiveness of the program and
19 make appropriate recommendations to the Secretary.

20 (Source: P.A. 94-351, eff. 7-28-05.)

21 (225 ILCS 65/60-20 new)

22 Sec. 60-20. Expiration of RN license; renewal. The
23 expiration date and renewal period for each registered
24 professional nurse license issued under this Act shall be set
25 by rule. The holder of a license may renew the license during

1 the month preceding the expiration date of the license by
2 paying the required fee. It is the responsibility of the
3 licensee to notify the Department in writing of a change of
4 address.

5 (225 ILCS 65/60-25 new)

6 Sec. 60-25. Restoration of RN license; temporary permit.

7 (a) Any license to practice professional nursing issued
8 under this Act that has expired or that is on inactive status
9 may be restored by making application to the Department and
10 filing proof of fitness acceptable to the Department as
11 specified by rule to have the license restored and by paying
12 the required restoration fee. Such proof of fitness may include
13 evidence certifying active lawful practice in another
14 jurisdiction.

15 (b) A licensee seeking restoration of a license after it
16 has expired or been placed on inactive status for more than 5
17 years shall file an application, on forms supplied by the
18 Department, and submit the restoration or renewal fees set
19 forth by the Department. The licensee shall also submit proof
20 of fitness to practice, including one of the following:

21 (1) Certification of active practice in another
22 jurisdiction, which may include a statement from the
23 appropriate board or licensing authority in the other
24 jurisdiction that the licensee was authorized to practice
25 during the term of said active practice.

1 (2) Proof of the successful completion of a
2 Department-approved licensure examination.

3 (3) An affidavit attesting to military service as
4 provided in subsection (c) of this Section; however, if
5 application is made within 2 years after discharge and if
6 all other provisions of subsection (c) of this Section are
7 satisfied, the applicant shall be required to pay the
8 current renewal fee.

9 (c) Any registered professional nurse license issued under
10 this Act that expired while the licensee was (1) in federal
11 service on active duty with the Armed Forces of the United
12 States or in the State Militia called into service or training
13 or (2) in training or education under the supervision of the
14 United States preliminary to induction into the military
15 service may have the license restored without paying any lapsed
16 renewal fees if, within 2 years after honorable termination of
17 such service, training, or education, the applicant furnishes
18 the Department with satisfactory evidence to the effect that
19 the applicant has been so engaged and that the individual's
20 service, training, or education has been so terminated.

21 (d) Any licensee who engages in the practice of
22 professional nursing with a lapsed license or while on inactive
23 status shall be considered to be practicing without a license,
24 which shall be grounds for discipline under Section 70-5 of
25 this Act.

26 (e) Pending restoration of a registered professional nurse

1 license under this Section, the Department may grant an
2 applicant a temporary permit to practice as a registered
3 professional nurse if the Department is satisfied that the
4 applicant holds an active, unencumbered license in good
5 standing in another jurisdiction. If the applicant holds more
6 than one current active license or one or more active temporary
7 licenses from another jurisdiction, the Department shall not
8 issue a temporary permit until it is satisfied that each
9 current active license held by the applicant is unencumbered.
10 The temporary permit, which shall be issued no later than 14
11 working days after receipt by the Department of an application
12 for the permit, shall be granted upon the submission of all of
13 the following to the Department:

14 (1) A signed and completed application for restoration
15 of licensure under this Section as a registered
16 professional nurse.

17 (2) Proof of (i) a current, active license in at least
18 one other jurisdiction and proof that each current, active
19 license or temporary permit held by the applicant is
20 unencumbered or (ii) fitness to practice nursing in
21 Illinois, as specified by rule.

22 (3) A signed and completed application for a temporary
23 permit.

24 (4) The required permit fee.

25 (f) The Department may refuse to issue to an applicant a
26 temporary permit authorized under this Section if, within 14

1 working days after its receipt of an application for a
2 temporary permit, the Department determines that:

3 (1) the applicant has been convicted within the last 5
4 years of any crime under the laws of any jurisdiction of
5 the United States that is (i) a felony or (ii) a
6 misdemeanor directly related to the practice of the
7 profession;

8 (2) within the last 5 years the applicant had a license
9 or permit related to the practice of nursing revoked,
10 suspended, or placed on probation by another jurisdiction
11 if at least one of the grounds for revoking, suspending, or
12 placing on probation is the same or substantially
13 equivalent to grounds for disciplinary action under this
14 Act; or

15 (3) the Department intends to deny restoration of the
16 license.

17 (g) The Department may revoke a temporary permit issued
18 under this Section if:

19 (1) the Department determines that the applicant has
20 been convicted within the last 5 years of any crime under
21 the laws of any jurisdiction of the United States that is
22 (i) a felony or (ii) a misdemeanor directly related to the
23 practice of the profession;

24 (2) within the last 5 years, the applicant had a
25 license or permit related to the practice of nursing
26 revoked, suspended, or placed on probation by another

1 jurisdiction, if at least one of the grounds for revoking,
2 suspending, or placing on probation is the same or
3 substantially equivalent to grounds in Illinois; or

4 (3) the Department intends to deny restoration of the
5 license.

6 (h) A temporary permit or renewed temporary permit shall
7 expire (i) upon issuance of an Illinois license or (ii) upon
8 notification that the Department intends to deny restoration of
9 licensure. A temporary permit shall expire 6 months from the
10 date of issuance. Further renewal may be granted by the
11 Department, in hardship cases, that shall automatically expire
12 upon issuance of the Illinois license or upon notification that
13 the Department intends to deny licensure, whichever occurs
14 first. No extensions shall be granted beyond the 6-month period
15 unless approved by the Secretary. Notification by the
16 Department under this Section must be by certified or
17 registered mail.

18 (225 ILCS 65/60-30 new)

19 Sec. 60-30. Inactive status of a RN license. Any registered
20 professional nurse, who notifies the Department in writing on
21 forms prescribed by the Department, may elect to place his or
22 her license on inactive status and shall, subject to rules of
23 the Department, be excused from payment of renewal fees until
24 notice is given to the Department, in writing, of his or her
25 intent to restore the license.

1 Any registered professional nurse requesting restoration
2 from inactive status shall be required to pay the current
3 renewal fee and shall be required to restore his or her
4 license, as provided by rule of the Department.

5 Any registered professional nurse whose license is on
6 inactive status shall not practice professional nursing as
7 defined by this Act in the State of Illinois.

8 (225 ILCS 65/60-35 new)

9 Sec. 60-35. RN Scope of practice.

10 (a) Practice as a registered professional nurse means the
11 full scope of nursing, with or without compensation, that
12 incorporates caring for all patients in all settings, through
13 nursing standards recognized by the Department, and includes,
14 but is not limited to, all of the following:

15 (1) The comprehensive nursing assessment of the health
16 status of patients that addresses changes to patient
17 conditions.

18 (2) The development of a plan of nursing care to be
19 integrated within the patient-centered health care plan
20 that establishes nursing diagnoses, and setting goals to
21 meet identified health care needs, determining nursing
22 interventions, and implementation of nursing care through
23 the execution of nursing strategies and regimens ordered or
24 prescribed by authorized healthcare professionals.

25 (3) The administration of medication or delegation of

1 medication administration to licensed practical nurses.

2 (4) Delegation of nursing interventions to implement
3 the plan of care.

4 (5) The provision for the maintenance of safe and
5 effective nursing care rendered directly or through
6 delegation.

7 (6) Advocating for patients.

8 (7) The evaluation of responses to interventions and
9 the effectiveness of the plan of care.

10 (8) Communicating and collaborating with other health
11 care professionals.

12 (9) The procurement and application of new knowledge
13 and technologies.

14 (10) The provision of health education and counseling.

15 (11) Participating in development of policies,
16 procedures, and systems to support patient safety.

17 (225 ILCS 65/Art. 65 heading new) (was 225 ILCS 65/Tit.
18 15 heading)

19 Article 65 ~~TITLE 15~~. ADVANCED PRACTICE NURSES

20 (225 ILCS 65/65-5 new) (was 225 ILCS 65/15-10)

21 (Section scheduled to be repealed on January 1, 2008)

22 Sec. 65-5 ~~15-10~~. Qualifications for APN licensure ~~Advanced~~
23 ~~practice nurse; qualifications; roster.~~

24 (a) Each applicant who successfully meets the requirements

1 of this Section shall be entitled to licensure as an advanced
2 practice nurse.

3 (b) An applicant for licensure to practice as an advanced
4 practice nurse must do each of the following: ~~A person shall be~~
5 ~~qualified for licensure as an advanced practice nurse if that~~
6 ~~person:~~

7 (1) Submit a completed application and any fees as
8 established by the Department. ~~has applied in writing in~~
9 ~~form and substance satisfactory to the Department and has~~
10 ~~not violated a provision of this Act or the rules adopted~~
11 ~~under this Act. The Department may take into consideration~~
12 ~~any felony conviction of the applicant but a conviction~~
13 ~~shall not operate as an absolute bar to licensure;~~

14 (2) Hold ~~holds~~ a current license to practice as a
15 registered professional nurse under this Act. ~~in Illinois;~~

16 (3) Have ~~has~~ successfully completed requirements to
17 practice as, and holds a current, national certification
18 as, a nurse midwife, clinical nurse specialist, nurse
19 practitioner, or certified registered nurse anesthetist
20 from the appropriate national certifying body as
21 determined by rule of the Department. ~~;~~

22 ~~(4) has paid the required fees as set by rule; and~~

23 (4) Have ~~(5) has~~ obtained a graduate degree appropriate
24 for national certification in a clinical advanced practice
25 nursing specialty or a graduate degree or post-master's
26 certificate from a graduate level program in a clinical

1 advanced practice nursing specialty.

2 (5) Have not violated the provisions of this Act
3 concerning the grounds for disciplinary action. The
4 Department may take into consideration any felony
5 conviction of the applicant, but such a conviction may not
6 operate as an absolute bar to licensure.

7 (6) Submit to the criminal history records check
8 required under Section 50-35 of this Act.

9 (c) ~~(b)~~ Those applicants seeking licensure in more than one
10 advanced practice nursing specialty category need not possess
11 multiple graduate degrees. Applicants may be eligible for
12 licenses for multiple advanced practice nurse licensure
13 specialties categories, provided that the applicant (i) has met
14 the requirements for at least one advanced practice nursing
15 specialty under paragraphs (3) and (5) of subsection (a) of
16 this Section, (ii) possesses an additional graduate education
17 that results in a certificate for another clinical advanced
18 practice nurse specialty category and that meets the
19 requirements for the national certification from the
20 appropriate nursing specialty, and (iii) holds a current
21 national certification from the appropriate national
22 certifying body for that additional advanced practice nursing
23 specialty category.

24 ~~(b-5) A registered professional nurse seeking licensure as~~
25 ~~an advanced practice nurse in the category of certified~~
26 ~~registered nurse anesthetist who applies on or before December~~

1 ~~31, 2006 and does not have a graduate degree as described in~~
2 ~~subsection (b) shall be qualified for licensure if that person:~~

3 ~~(1) submits evidence of having successfully completed~~
4 ~~a nurse anesthesia program described in item (5) of~~
5 ~~subsection (a) of this Section prior to January 1, 1999;~~

6 ~~(2) submits evidence of certification as a registered~~
7 ~~nurse anesthetist by an appropriate national certifying~~
8 ~~body, as determined by rule of the Department; and~~

9 ~~(3) has continually maintained active, up-to-date~~
10 ~~recertification status as a certified registered nurse~~
11 ~~anesthetist by an appropriate national recertifying body,~~
12 ~~as determined by rule of the Department.~~

13 ~~(c) The Department shall provide by rule for APN licensure~~
14 ~~of registered professional nurses who (1) apply for licensure~~
15 ~~before July 1, 2001 and (2) submit evidence of completion of a~~
16 ~~program described in item (5) of subsection (a) or in~~
17 ~~subsection (b) and evidence of practice for at least 10 years~~
18 ~~as a nurse practitioner.~~

19 (d) Any person who holds a valid license as an advanced
20 practice nurse issued under this Act as this Act existed before
21 the effective date of this amendatory Act of the 95th General
22 Assembly shall be subject only to the advanced practice nurse
23 license renewal requirements of this Act as this Act exists on
24 and after the effective date of this amendatory Act of the 95th
25 General Assembly upon the expiration of that license. The
26 ~~Department shall maintain a separate roster of advanced~~

1 ~~practice nurses licensed under this Title and their licenses~~
2 ~~shall indicate "Registered Nurse/Advanced Practice Nurse".~~

3 (Source: P.A. 93-296, eff. 7-22-03; 94-348, eff. 7-28-05.)

4 (225 ILCS 65/65-10 new) (was 225 ILCS 65/15-13)

5 (Section scheduled to be repealed on January 1, 2008)

6 Sec. 65-10 ~~15-13~~. APN license ~~License~~ pending status.

7 (a) A graduate of an advanced practice nursing program may
8 practice in the State of Illinois in the role of certified
9 clinical nurse specialist, certified nurse midwife, certified
10 nurse practitioner, or certified registered nurse anesthetist
11 for not longer than 6 months provided he or she submits all of
12 the following:

13 (1) An application for licensure as an advanced
14 practice nurse in Illinois and all fees established by
15 rule.

16 (2) Proof of an application to take the national
17 certification examination in the specialty.

18 (3) Proof of completion of a graduate advanced practice
19 education program that allows the applicant to be eligible
20 for national certification in a clinical advanced practice
21 nursing speciality and that allows the applicant to be
22 eligible for licensure in Illinois in the area of his or
23 her specialty.

24 (4) Proof that he or she is licensed in Illinois as a
25 registered professional nurse.

1 ~~(5) Proof that he or she has a completed proposed~~
2 ~~collaborative agreement or practice agreement as required~~
3 ~~under Section 15-15 or 15-25 of this Act.~~

4 ~~(6) The license application fee as set by rule.~~

5 (b) License pending status shall preclude delegation of
6 prescriptive authority.

7 (c) A graduate practicing in accordance with this Section
8 must use the title "license pending certified clinical nurse
9 specialist", "license pending certified nurse midwife",
10 "license pending certified nurse practitioner", or "license
11 pending certified registered nurse anesthetist", whichever is
12 applicable.

13 (Source: P.A. 92-744, eff. 7-25-02.)

14 (225 ILCS 65/65-15 new)

15 Sec. 65-15. Expiration of APN license; renewal. The
16 expiration date and renewal period for each advanced practice
17 nurse license issued under this Act shall be set by rule. The
18 holder of a license may renew the license during the month
19 preceding the expiration date of the license by paying the
20 required fee. It is the responsibility of the licensee to
21 notify the Department in writing of a change of address. Each
22 advanced practice nurse is required to show proof of continued,
23 current national certification in the specialty.

24 (225 ILCS 65/65-20 new)

1 Sec. 65-20. Restoration of APN license; temporary permit.

2 (a) Any license issued under this Act that has expired or
3 that is on inactive status may be restored by making
4 application to the Department and filing proof of fitness
5 acceptable to the Department as specified by rule to have the
6 license restored and by paying the required restoration fee.
7 Such proof of fitness may include evidence certifying active
8 lawful practice in another jurisdiction.

9 (b) A licensee seeking restoration of a license after it
10 has expired or been placed on inactive status for more than 5
11 years shall file an application, on forms supplied by the
12 Department, and submit the restoration or renewal fees set
13 forth by the Department. The licensee shall also submit proof
14 of fitness to practice, including one of the following:

15 (1) Certification of active practice in another
16 jurisdiction, which may include a statement from the
17 appropriate board or licensing authority in the other
18 jurisdiction in which the licensee was authorized to
19 practice during the term of said active practice.

20 (2) Proof of the successful completion of a
21 Department-approved licensure examination.

22 (3) An affidavit attesting to military service as
23 provided in subsection (c) of this Section; however, if
24 application is made within 2 years after discharge and if
25 all other provisions of subsection (c) of this Section are
26 satisfied, the applicant shall be required to pay the

1 current renewal fee.

2 (4) Other proof as established by rule.

3 (c) Any advanced practice nurse license issued under this
4 Act that expired while the licensee was (1) in federal service
5 on active duty with the Armed Forces of the United States or in
6 the State Militia called into service or training or (2) in
7 training or education under the supervision of the United
8 States preliminary to induction into the military service may
9 have the license restored without paying any lapsed renewal
10 fees if, within 2 years after honorable termination of such
11 service, training, or education, the applicant furnishes the
12 Department with satisfactory evidence to the effect that the
13 applicant has been so engaged and that the individual's
14 service, training, or education has been so terminated.

15 (d) Any licensee who engages in the practice of advanced
16 practice nursing with a lapsed license or while on inactive
17 status shall be considered to be practicing without a license,
18 which shall be grounds for discipline under Section 70-5 of
19 this Act.

20 (e) Pending restoration of an advanced practice nurse
21 license under this Section, the Department may grant an
22 applicant a temporary permit to practice as an advanced
23 practice nurse if the Department is satisfied that the
24 applicant holds an active, unencumbered license in good
25 standing in another jurisdiction. If the applicant holds more
26 than one current active license or one or more active temporary

1 licenses from another jurisdiction, the Department shall not
2 issue a temporary permit until it is satisfied that each
3 current active license held by the applicant is unencumbered.
4 The temporary permit, which shall be issued no later than 14
5 working days after receipt by the Department of an application
6 for the permit, shall be granted upon the submission of all of
7 the following to the Department:

8 (1) A signed and completed application for restoration
9 of licensure under this Section as an advanced practice
10 nurse.

11 (2) Proof of (i) a current, active license in at least
12 one other jurisdiction and proof that each current, active
13 license or temporary permit held by the applicant is
14 unencumbered or (ii) fitness to practice nursing in
15 Illinois, as specified by rule.

16 (3) A signed and completed application for a temporary
17 permit.

18 (4) The required permit fee.

19 (5) Other proof as established by rule.

20 (f) The Department may refuse to issue to an applicant a
21 temporary permit authorized under this Section if, within 14
22 working days after its receipt of an application for a
23 temporary permit, the Department determines that:

24 (1) the applicant has been convicted within the last 5
25 years of any crime under the laws of any jurisdiction of
26 the United States that is (i) a felony or (ii) a

1 misdemeanor directly related to the practice of the
2 profession;

3 (2) within the last 5 years, the applicant had a
4 license or permit related to the practice of nursing
5 revoked, suspended, or placed on probation by another
6 jurisdiction if at least one of the grounds for revoking,
7 suspending, or placing on probation is the same or
8 substantially equivalent to grounds for disciplinary
9 action under this Act; or

10 (3) the Department intends to deny restoration of the
11 license.

12 (g) The Department may revoke a temporary permit issued
13 under this Section if:

14 (1) the Department determines that the applicant has
15 been convicted within the last 5 years of any crime under
16 the laws of any jurisdiction of the United States that is
17 (i) a felony or (ii) a misdemeanor directly related to the
18 practice of the profession;

19 (2) within the last 5 years, the applicant had a
20 license or permit related to the practice of nursing
21 revoked, suspended, or placed on probation by another
22 jurisdiction, if at least one of the grounds for revoking,
23 suspending, or placing on probation is the same or
24 substantially equivalent to grounds in Illinois; or

25 (3) the Department intends to deny restoration of the
26 license.

1 (h) A temporary permit or renewed temporary permit shall
2 expire (i) upon issuance of an Illinois license or (ii) upon
3 notification that the Department intends to deny restoration of
4 licensure. Except as otherwise provided in this Section, a
5 temporary permit shall expire 6 months from the date of
6 issuance. Further renewal may be granted by the Department in
7 hardship cases that shall automatically expire upon issuance of
8 the Illinois license or upon notification that the Department
9 intends to deny licensure, whichever occurs first. No
10 extensions shall be granted beyond the 6-month period unless
11 approved by the Secretary. Notification by the Department under
12 this Section must be by certified or registered mail.

13 (225 ILCS 65/65-25 new)

14 Sec. 65-25. Inactive status of a APN license. Any advanced
15 practice nurse who notifies the Department in writing on forms
16 prescribed by the Department may elect to place his or her
17 license on inactive status and shall, subject to rules of the
18 Department, be excused from payment of renewal fees until
19 notice is given to the Department in writing of his or her
20 intent to restore the license.

21 Any advanced practice nurse requesting restoration from
22 inactive status shall be required to pay the current renewal
23 fee and shall be required to restore his or her license, as
24 provided by rule of the Department.

25 Any advanced practice nurse whose license is on inactive

1 status shall not practice advanced practice nursing, as defined
2 by this Act in the State of Illinois.

3 (225 ILCS 65/65-30 new)

4 Sec. 65-30. APN Scope of practice.

5 (a) Advanced practice nursing by certified nurse
6 practitioners, certified nurse anesthetists, certified nurse
7 midwives, or clinical nurse specialists is based on knowledge
8 and skills acquired throughout an advanced practice nurse's
9 nursing education, training, and experience.

10 (b) Practice as an advanced practice nurse means a scope of
11 nursing practice, with or without compensation, and includes
12 the registered nurse scope of practice.

13 (c) The scope of practice of an advanced practice nurse
14 includes, but is not limited to, each of the following:

15 (1) Advanced nursing patient assessment and diagnosis.

16 (2) Ordering diagnostic and therapeutic tests and
17 procedures, performing those tests and procedures when using
18 health care equipment, and interpreting and using the results
19 of diagnostic and therapeutic tests and procedures ordered by
20 the advanced practice nurse or another health care
21 professional.

22 (3) Ordering treatments, ordering or applying
23 appropriate medical devices, and using nursing medical,
24 therapeutic, and corrective measures to treat illness and
25 improve health status.

1 (4) Providing palliative and end-of-life care.

2 (5) Providing advanced counseling, patient education,
3 health education, and patient advocacy.

4 (6) Prescriptive authority as defined in Section 65-40
5 of this Act.

6 (7) Delegating selected nursing activities or tasks to
7 a licensed practical nurse, a registered professional nurse, or
8 other personnel.

9 (225 ILCS 65/65-35 new) (was 225 ILCS 65/15-15)

10 (Section scheduled to be repealed on January 1, 2008)

11 Sec. 65-35 ~~15-15~~. Written collaborative agreements.

12 (a) A written collaborative agreement is required for all
13 advanced practice nurses engaged in clinical practice, except
14 for advanced practice nurses who are authorized to practice in
15 a hospital or ambulatory surgical treatment center.

16 (a-5) If an advanced practice nurse engages in clinical
17 practice outside of a hospital or ambulatory surgical treatment
18 center in which he or she is authorized to practice, the
19 advanced practice nurse must have a written collaborative
20 agreement. Except as provided in Section 15-25, no person shall
21 engage in the practice of advanced practice nursing except when
22 licensed under this Title and pursuant to a written
23 collaborative agreement with a collaborating physician.

24 (b) A written collaborative agreement shall describe the
25 working relationship of the advanced practice nurse with the

1 collaborating physician or podiatrist and shall authorize the
2 categories of care, treatment, or procedures to be performed by
3 the advanced practice nurse. A collaborative agreement with a
4 dentist must be in accordance with subsection (c-10) of this
5 Section. Collaboration does not require an employment
6 relationship between the collaborating physician and advanced
7 practice nurse. Collaboration means the relationship under
8 which an advanced practice nurse works with a collaborating
9 physician or podiatrist in an active clinical practice to
10 deliver health care services in accordance with (i) the
11 advanced practice nurse's training, education, and experience
12 and (ii) collaboration and consultation ~~medical direction~~ as
13 documented in a jointly developed written collaborative
14 agreement.

15 The agreement shall be defined to promote the exercise of
16 professional judgment by the advanced practice nurse
17 commensurate with his or her education and experience. The
18 services to be provided by the advanced practice nurse shall be
19 services that the collaborating physician or podiatrist is
20 authorized to and generally provides to his or her patients in
21 the normal course of his or her clinical medical practice, and
22 except as set forth in subsection (c-5) of this Section. The
23 agreement need not describe the exact steps that an advanced
24 practice nurse must take with respect to each specific
25 condition, disease, or symptom but must specify which
26 authorized procedures require the a-physician's presence of the

1 collaborating physician or podiatrist as the procedures are
2 being performed. The collaborative relationship under an
3 agreement shall not be construed to require the personal
4 presence of a physician or podiatrist at all times at the place
5 where services are rendered. Methods of communication shall be
6 available for consultation with the collaborating physician or
7 podiatrist in person or by telecommunications in accordance
8 with established written guidelines as set forth in the written
9 agreement.

10 (c) Collaboration and consultation ~~Physician—medical~~
11 ~~direction~~ under all collaboration agreements ~~an agreement~~
12 shall be adequate if a collaborating physician or podiatrist
13 does each of the following:

14 (1) Participates ~~participates~~ in the joint formulation
15 and joint approval of orders or guidelines with the
16 advanced practice nurse ~~APN~~ and he or she periodically
17 reviews such orders and the services provided patients
18 under such orders in accordance with accepted standards of
19 medical practice and advanced practice nursing practice. ~~†~~

20 (2) Meets in person with the advanced practice nurse ~~is~~
21 ~~on site~~ at least once a month to provide collaboration
22 ~~medical direction~~ and consultation. In the case of
23 anesthesia services provided by a certified registered
24 nurse anesthetist, an anesthesiologist, physician,
25 dentist, or podiatrist must participate through discussion
26 of and agreement with the anesthesia plan and remain

1 physically present and available on the premises during the
2 delivery of anesthesia services for diagnosis,
3 consultation, and treatment of emergency medical
4 conditions. ~~and~~

5 (3) Is ~~is~~ available through telecommunications for
6 consultation on medical problems, complications, or
7 emergencies or patient referral. In the case of anesthesia
8 services provided by a certified registered nurse
9 anesthetist, an anesthesiologist, physician, dentist, or
10 podiatrist must participate through discussion of and
11 agreement with the anesthesia plan and remain physically
12 present and available on the premises during the delivery
13 of anesthesia services for diagnosis, consultation, and
14 treatment of emergency medical conditions.

15 The agreement must contain provisions detailing notice for
16 termination or change of status involving a written
17 collaborative agreement, except when such notice is given for
18 just cause.

19 (c-5) A certified registered nurse anesthetist, who
20 provides anesthesia services outside of a hospital or
21 ambulatory surgical treatment center shall enter into a written
22 collaborative agreement with an anesthesiologist or the
23 operating physician licensed to practice medicine in all its
24 branches or the operating podiatrist performing the procedure.
25 Outside of a hospital or ambulatory surgical treatment center,
26 the certified registered nurse anesthetist may provide only

1 those services that the collaborating podiatrist is authorized
2 to provide pursuant to the Podiatric Medical Practice Act of
3 1987 and rules adopted thereunder. A certified registered nurse
4 anesthetist may select, order, and administer medication,
5 including controlled substances, and apply appropriate medical
6 devices for delivery of anesthesia services under the
7 anesthesia plan agreed with by the anesthesiologist or the
8 operating physician or operating podiatrist.

9 (c-10) A certified registered nurse anesthetist who
10 provides anesthesia services in a dental office shall enter
11 into a written collaborative agreement with an
12 anesthesiologist or the physician licensed to practice
13 medicine in all its branches or the operating dentist
14 performing the procedure. The agreement shall describe the
15 working relationship of the certified registered nurse
16 anesthetist and dentist and shall authorize the categories of
17 care, treatment, or procedures to be performed by the certified
18 registered nurse anesthetist. In a collaborating dentist's
19 office, the certified registered nurse anesthetist may only
20 provide those services that the operating dentist with the
21 appropriate permit is authorized to provide pursuant to the
22 Illinois Dental Practic Act and rules adopted thereunder. For
23 anesthesia services, an anesthesiologist, physician, or
24 operating dentist shall participate through discussion of and
25 agreement with the anesthesia plan and shall remain physically
26 present and be available on the premises during the delivery of

1 anesthesia services for diagnosis, consultation, and treatment
2 of emergency medical conditions. A certified registered nurse
3 anesthetist may select, order, and administer medication,
4 including controlled substances, and apply appropriate medical
5 devices for delivery of anesthesia services under the
6 anesthesia plan agreed with by the operating dentist.

7 (d) A copy of the signed, written collaborative agreement
8 must be available to the Department upon request from both the
9 advanced practice nurse and the collaborating physician or
10 podiatrist and shall be annually updated.

11 (e) An advanced practice nurse shall not be liable for the
12 acts or omissions of a collaborating physician, dentist, or
13 podiatrist solely on the basis of having signed a written
14 collaborative agreement.

15 (f) Nothing in this Act shall be construed to limit the
16 delegation of tasks or duties by a physician to a licensed
17 practical nurse, a registered professional nurse, or other
18 persons.

19 (g) An advanced practice nurse shall inform each
20 collaborating physician, dentist, or podiatrist of all
21 collaborative agreements he or she has signed and provide a
22 copy of these to any collaborating physician, dentist, or
23 podiatrist upon request.

24 (Source: P.A. 90-742, eff. 8-13-98; 91-414, eff. 8-6-99.)

1 (Section scheduled to be repealed on January 1, 2008)

2 Sec. 65-40 ~~15-20~~. Prescriptive authority.

3 (a) A collaborating physician or podiatrist may, but is not
4 required to, delegate ~~limited~~ prescriptive authority to an
5 advanced practice nurse as part of a written collaborative
6 agreement. This authority may, but is not required to, include
7 prescription of, selection of, orders for, administration of,
8 storage of, acceptance of samples of, and dispensing over the
9 counter medications, legend drugs, medical gases, and
10 ~~dispensing of legend drugs and legend~~ controlled substances
11 categorized as Schedule III, III-N, IV, or V controlled
12 substances, as defined in Article II of the Illinois Controlled
13 Substances Act, and other preparations, including, but not
14 limited to, botanical and herbal remedies. The collaborating
15 physician or podiatrist must have a valid current Illinois
16 controlled substance license and federal registration to
17 delegate authority to prescribe delegated controlled
18 substances.

19 (b) To prescribe ~~Schedule III, IV, or V~~ controlled
20 substances under this Section, an advanced practice nurse must
21 obtain a mid-level practitioner controlled substance license.
22 Medication orders shall be reviewed periodically by the
23 collaborating physician or podiatrist.

24 (c) The collaborating physician or podiatrist shall file
25 with the Department notice of delegation of prescriptive
26 authority and termination of such delegation, in accordance

1 with rules of the Department. Upon receipt of this notice
2 delegating authority to prescribe Schedule III, III-N, IV, or V
3 controlled substances, the licensed advanced practice nurse
4 shall be eligible to register for a mid-level practitioner
5 controlled substance license under Section 303.05 of the
6 Illinois Controlled Substances Act.

7 (d) In addition to the requirements of subsections (a),
8 (b), and (c) of this Section, a collaborating physician may,
9 but is not required to, delegate authority to an advanced
10 practice nurse to prescribe Schedule II or II-N controlled
11 substances, if all of the following conditions apply:

12 (1) No more than 5 Schedule II or II-N controlled
13 substances by oral dosage may be delegated.

14 (2) Any delegation must be controlled substances that
15 the collaborating physician prescribes.

16 (3) Any prescription must be limited to no more than a
17 30-day oral dosage, with any continuation authorized only
18 after prior approval of the collaborating physician.

19 (4) The advanced practice nurse must discuss the
20 condition of any patients for whom a controlled substance
21 is prescribed monthly with the delegating physician.

22 (e) ~~(d)~~ Nothing in this Act shall be construed to limit the
23 delegation of tasks or duties by a physician to a licensed
24 practical nurse, a registered professional nurse, or other
25 persons personnel.

26 (Source: P.A. 90-742, eff. 8-13-98; 90-818, eff. 3-23-99.)

1 (225 ILCS 65/65-45 new) (was 225 ILCS 65/15-25)

2 (Section scheduled to be repealed on January 1, 2008)

3 Sec. 65-45 ~~15-25~~. Advanced practice nursing in hospitals or
4 ambulatory surgical treatment centers ~~Certified registered~~
5 ~~nurse anesthetists.~~

6 (a) An advanced practice nurse ~~A licensed certified~~
7 ~~registered nurse anesthetist~~ may provide ~~anesthesia~~ services
8 ~~pursuant to the order of a licensed physician, licensed~~
9 ~~dentist, or licensed podiatrist~~ in a licensed hospital or, a
10 licensed ambulatory surgical treatment center without
11 prescriptive authority or a written collaborative agreement
12 pursuant to Section 65-35 of this Act, ~~or the office of a~~
13 ~~licensed physician, the office of a licensed dentist, or the~~
14 ~~office of a licensed podiatrist.~~ An advanced practice nurse
15 must possess clinical privileges recommended by the hospital
16 medical staff and granted by the hospital or the consulting
17 medical staff committee and ambulatory surgical treatment
18 center in order to provide services. The medical staff or
19 consulting medical staff committee shall periodically review
20 the services of advanced practice nurses granted clinical
21 privileges. Authority may also be granted to individual
22 advanced practice nurses to select, order, and administer
23 medications, including controlled substances, to provide
24 delineated care. The attending physician shall determine an
25 advanced practice nurse's role in providing care for his or her

1 patients, except as otherwise provided in the medical staff
2 bylaws or consulting committee policies.

3 (a-5) For anesthesia services provided by a certified
4 registered nurse anesthetist, an anesthesiologist, physician,
5 dentist, or podiatrist shall participate through discussion of
6 and agreement with the anesthesia plan and shall remain
7 physically present and be available on the premises during the
8 delivery of anesthesia services for diagnosis, consultation,
9 and treatment of emergency medical conditions, unless hospital
10 policy adopted pursuant to clause (B) of subdivision (3) of
11 Section 10.7 of the Hospital Licensing Act or ambulatory
12 surgical treatment center policy adopted pursuant to clause (B)
13 of subdivision (3) of Section 6.5 of the Ambulatory Surgical
14 Treatment Center Act provides otherwise. A certified
15 registered nurse anesthetist may select, order, and administer
16 medication for anesthesia services under the anesthesia plan
17 agreed to by the anesthesiologist or the physician, in
18 accordance with hospital alternative policy or the medical
19 staff consulting committee policies of a licensed ambulatory
20 surgical treatment center.

21 (b) An advanced practice ~~A certified registered~~ nurse
22 ~~anesthetist~~ who provides ~~anesthesia~~ services in a hospital
23 shall do so in accordance with Section 10.7 of the Hospital
24 Licensing Act and, in an ambulatory surgical treatment center,
25 in accordance with Section 6.5 of the Ambulatory Surgical
26 Treatment Center Act.

1 ~~(c) A certified registered nurse anesthetist who provides~~
2 ~~anesthesia services in a physician office, dental office, or~~
3 ~~podiatric office shall enter into a written practice agreement~~
4 ~~with an anesthesiologist or the physician licensed to practice~~
5 ~~medicine in all its branches, the dentist, or the podiatrist~~
6 ~~performing the procedure. The agreement shall describe the~~
7 ~~working relationship of the certified registered nurse~~
8 ~~anesthetist and anesthesiologist, physician, dentist, or~~
9 ~~podiatrist and shall authorize the categories of care,~~
10 ~~treatment, or procedures to be performed by the certified~~
11 ~~registered nurse anesthetist. In a dentist's office, the~~
12 ~~certified registered nurse anesthetist may only provide those~~
13 ~~services the dentist is authorized to provide pursuant to the~~
14 ~~Illinois Dental Practice Act and rules. In a podiatrist's~~
15 ~~office, the certified registered nurse anesthetist may only~~
16 ~~provide those services the podiatrist is authorized to provide~~
17 ~~pursuant to the Podiatric Medical Practice Act of 1987 and~~
18 ~~rules. For anesthesia services, an anesthesiologist,~~
19 ~~physician, dentist, or podiatrist shall participate through~~
20 ~~discussion of and agreement with the anesthesia plan and shall~~
21 ~~remain physically present and be available on the premises~~
22 ~~during the delivery of anesthesia services for diagnosis,~~
23 ~~consultation, and treatment of emergency medical conditions.~~

24 ~~(d) A certified registered nurse anesthetist is not~~
25 ~~required to possess prescriptive authority or a written~~
26 ~~collaborative agreement meeting the requirements of Section~~

1 ~~15-15 to provide anesthesia services ordered by a licensed~~
2 ~~physician, dentist, or podiatrist. Certified registered nurse~~
3 ~~anesthetists are authorized to select, order, and administer~~
4 ~~drugs and apply the appropriate medical devices in the~~
5 ~~provision of anesthesia services under the anesthesia plan~~
6 ~~agreed with by the anesthesiologist or the physician in~~
7 ~~accordance with hospital alternative policy or the medical~~
8 ~~staff consulting committee policies of a licensed ambulatory~~
9 ~~surgical treatment center. In a physician's office, dentist's~~
10 ~~office, or podiatrist's office, the anesthesiologist,~~
11 ~~operating physician, operating dentist, or operating~~
12 ~~podiatrist shall agree with the anesthesia plan, in accordance~~
13 ~~with the written practice agreement.~~

14 ~~(c) A certified registered nurse anesthetist may be~~
15 ~~delegated limited prescriptive authority under Section 15-20~~
16 ~~in a written collaborative agreement meeting the requirements~~
17 ~~of Section 15-15.~~

18 (Source: P.A. 91-414, eff. 8-6-99.)

19 (225 ILCS 65/65-50 new) (was 225 ILCS 65/15-30)

20 (Section scheduled to be repealed on January 1, 2008)

21 Sec. 65-50 ~~15-30~~. APN title ~~Title~~.

22 (a) No person shall use any words, abbreviations, figures,
23 letters, title, sign, card, or device tending to imply that he
24 or she is an advanced practice nurse, including but not limited
25 to using the titles or initials "Advanced Practice Nurse",

1 "Certified Nurse Midwife", "Certified Nurse Practitioner",
2 "Certified Registered Nurse Anesthetist", "Clinical Nurse
3 Specialist", "A.P.N.", "C.N.M.", "C.N.P.", "C.R.N.A.",
4 "C.N.S.", or similar titles or initials, with the intention of
5 indicating practice as an advanced practice nurse without
6 meeting the requirements of this Act.

7 (b) No advanced practice nurse shall indicate to other
8 persons that he or she is qualified to engage in the practice
9 of medicine. ~~No advanced practice nurse shall use the title of~~
10 ~~doctor or associate with his or her name or any other term to~~
11 ~~indicate to other persons that he or she is qualified to engage~~
12 ~~in the general practice of medicine.~~

13 (c) ~~(b)~~ An advanced practice nurse shall verbally identify
14 himself or herself as an advanced practice nurse, l including
15 specialty certification, l to each patient.

16 (d) ~~(e)~~ Nothing in this Act shall be construed to relieve a
17 physician of professional or legal responsibility for the care
18 and treatment of persons attended by him or her or to relieve
19 an advanced practice nurse of the professional or legal
20 responsibility for the care and treatment of persons attended
21 by him or her.

22 (Source: P.A. 90-742, eff. 8-13-98; 91-414, eff. 8-6-99.)

23 (225 ILCS 65/65-55 new) (was 225 ILCS 65/15-40)

24 (Section scheduled to be repealed on January 1, 2008)

25 Sec. 65-55 ~~15-40~~. Advertising as an APN.

1 (a) A person licensed under this Act as an advanced
2 practice nurse ~~Title~~ may advertise the availability of
3 professional services in the public media or on the premises
4 where the professional services are rendered. The advertising
5 shall be limited to the following information:

6 (1) publication of the person's name, title, office
7 hours, address, and telephone number;

8 (2) information pertaining to the person's areas of
9 specialization, including but not limited to appropriate
10 board certification or limitation of professional
11 practice;

12 (3) publication of the person's collaborating
13 physician's, dentist's, or podiatrist's name, title, and
14 areas of specialization;

15 (4) information on usual and customary fees for routine
16 professional services offered, which shall include
17 notification that fees may be adjusted due to complications
18 or unforeseen circumstances;

19 (5) announcements of the opening of, change of, absence
20 from, or return to business;

21 (6) announcement of additions to or deletions from
22 professional licensed staff; and

23 (7) the issuance of business or appointment cards.

24 (b) It is unlawful for a person licensed under this Act as
25 an advanced practice nurse ~~Title~~ to use testimonials or claims
26 of superior quality of care to entice the public. It shall be

1 unlawful to advertise fee comparisons of available services
2 with those of other licensed persons.

3 (c) This Article ~~Title~~ does not authorize the advertising
4 of professional services that the offeror of the services is
5 not licensed or authorized to render. Nor shall the advertiser
6 use statements that contain false, fraudulent, deceptive, or
7 misleading material or guarantees of success, statements that
8 play upon the vanity or fears of the public, or statements that
9 promote or produce unfair competition.

10 (d) It is unlawful and punishable under the penalty
11 provisions of this Act for a person licensed under this Article
12 ~~Title~~ to knowingly advertise that the licensee will accept as
13 payment for services rendered by assignment from any third
14 party payor the amount the third party payor covers as payment
15 in full, if the effect is to give the impression of eliminating
16 the need of payment by the patient of any required deductible
17 or copayment applicable in the patient's health benefit plan.

18 (e) ~~(d-5)~~ A licensee shall include in every advertisement
19 for services regulated under this Act his or her title as it
20 appears on the license or the initials authorized under this
21 Act.

22 (f) ~~(e)~~ As used in this Section, "advertise" means
23 solicitation by the licensee or through another person or
24 entity by means of handbills, posters, circulars, motion
25 pictures, radio, newspapers, or television or any other manner.

26 (Source: P.A. 90-742, eff. 8-13-98; 91-310, eff. 1-1-00.)

1 (225 ILCS 65/65-60 new) (was 225 ILCS 65/15-45)

2 (Section scheduled to be repealed on January 1, 2008)

3 Sec. 65-60 ~~15-45~~. Continuing education. The Department
4 shall adopt rules of continuing education for persons licensed
5 under this Article ~~Title~~ that require 50 hours of continuing
6 education per 2-year license renewal cycle. Completion of the
7 50 hours of continuing education shall be deemed to satisfy the
8 continuing education requirements for renewal of a registered
9 professional nurse license as required by this Act. The rules
10 shall not be inconsistent with requirements of relevant
11 national certifying bodies or State or national professional
12 associations. The rules shall also address variances in part or
13 in whole for good cause, including but not limited to illness
14 or hardship. The continuing education rules shall assure that
15 licensees are given the opportunity to participate in programs
16 sponsored by or through their State or national professional
17 associations, hospitals, or other providers of continuing
18 education. Each licensee is responsible for maintaining
19 records of completion of continuing education and shall be
20 prepared to produce the records when requested by the
21 Department.

22 (Source: P.A. 92-750, eff. 1-1-03.)

23 (225 ILCS 65/65-65 new) (was 225 ILCS 65/15-55)

24 (Section scheduled to be repealed on January 1, 2008)

1 Sec. 65-65 ~~15-55~~. Reports relating to APN professional
2 conduct and capacity.

3 (a) Entities Required to Report.

4 (1) Health Care Institutions. The chief administrator
5 or executive officer of a health care institution licensed
6 by the Department of Public Health, which provides the
7 minimum due process set forth in Section 10.4 of the
8 Hospital Licensing Act, shall report to the ~~APN~~ Board when
9 an advanced practice nurse's a licensee's organized
10 professional staff clinical privileges are terminated or
11 are restricted based on a final determination, in
12 accordance with that institution's bylaws or rules and
13 regulations, that (i) a person has either committed an act
14 or acts that may directly threaten patient care and that
15 are not of an administrative nature or (ii) that a person
16 may be mentally or physically disabled in a manner that may
17 endanger patients under that person's care. The chief
18 administrator or officer shall also report if an advanced
19 practice nurse a licensee accepts voluntary termination or
20 restriction of clinical privileges in lieu of formal action
21 based upon conduct related directly to patient care and not
22 of an administrative nature, or in lieu of formal action
23 seeking to determine whether a person may be mentally or
24 physically disabled in a manner that may endanger patients
25 under that person's care. The ~~APN~~ Board shall provide by
26 rule for the reporting to it of all instances in which a

1 person licensed under this Article Title, who is impaired
2 by reason of age, drug, or alcohol abuse or physical or
3 mental impairment, is under supervision and, where
4 appropriate, is in a program of rehabilitation. Reports
5 submitted under this subsection shall be strictly
6 confidential and may be reviewed and considered only by the
7 members of the ~~APN~~ Board or authorized staff as provided by
8 rule of the ~~APN~~ Board. Provisions shall be made for the
9 periodic report of the status of any such reported person
10 not less than twice annually in order that the ~~APN~~ Board
11 shall have current information upon which to determine the
12 status of that person. Initial and periodic reports of
13 impaired advanced practice nurses shall not be considered
14 records within the meaning of the State Records Act and
15 shall be disposed of, following a determination by the ~~APN~~
16 Board that such reports are no longer required, in a manner
17 and at an appropriate time as the ~~APN~~ Board shall determine
18 by rule. The filing of reports submitted under this
19 subsection shall be construed as the filing of a report for
20 purposes of subsection (c) of this Section.

21 (2) Professional Associations. The President or chief
22 executive officer of an association or society of persons
23 licensed under this Article Title, operating within this
24 State, shall report to the ~~APN~~ Board when the association
25 or society renders a final determination that a person
26 licensed under this Article Title has committed

1 unprofessional conduct related directly to patient care or
2 that a person may be mentally or physically disabled in a
3 manner that may endanger patients under the person's care.

4 (3) Professional Liability Insurers. Every insurance
5 company that offers policies of professional liability
6 insurance to persons licensed under this Article Title, or
7 any other entity that seeks to indemnify the professional
8 liability of a person licensed under this Article Title,
9 shall report to the ~~APN~~ Board the settlement of any claim
10 or cause of action, or final judgment rendered in any cause
11 of action, that alleged negligence in the furnishing of
12 patient care by the licensee when the settlement or final
13 judgment is in favor of the plaintiff.

14 (4) State's Attorneys. The State's Attorney of each
15 county shall report to the ~~APN~~ Board all instances in which
16 a person licensed under this Article Title is convicted or
17 otherwise found guilty of the commission of a felony.

18 (5) State Agencies. All agencies, boards, commissions,
19 departments, or other instrumentalities of the government
20 of this State shall report to the ~~APN~~ Board any instance
21 arising in connection with the operations of the agency,
22 including the administration of any law by the agency, in
23 which a person licensed under this Article Title has either
24 committed an act or acts that may constitute a violation of
25 this Article Title, that may constitute unprofessional
26 conduct related directly to patient care, or that indicates

1 that a person licensed under this Article Title may be
2 mentally or physically disabled in a manner that may
3 endanger patients under that person's care.

4 (b) Mandatory Reporting. All reports required under items
5 (16) and (17) ~~(8) and (9)~~ of subsection (a) of Section 70-5
6 ~~15-50 and under this Section~~ shall be submitted to the ~~APN~~
7 Board in a timely fashion. The reports shall be filed in
8 writing within 60 days after a determination that a report is
9 required under this Article Title. All reports shall contain
10 the following information:

11 (1) The name, address, and telephone number of the
12 person making the report.

13 (2) The name, address, and telephone number of the
14 person who is the subject of the report.

15 (3) The name or other means of identification of any
16 patient or patients whose treatment is a subject of the
17 report, except that no medical records may be revealed
18 without the written consent of the patient or patients.

19 (4) A brief description of the facts that gave rise to
20 the issuance of the report, including but not limited to
21 the dates of any occurrences deemed to necessitate the
22 filing of the report.

23 (5) If court action is involved, the identity of the
24 court in which the action is filed, the docket number, and
25 date of filing of the action.

26 (6) Any further pertinent information that the

1 reporting party deems to be an aid in the evaluation of the
2 report.

3 Nothing contained in this Section shall be construed to in
4 any way waive or modify the confidentiality of medical reports
5 and committee reports to the extent provided by law. Any
6 information reported or disclosed shall be kept for the
7 confidential use of the ~~APN~~ Board, the ~~APN~~ Board's attorneys,
8 the investigative staff, and authorized clerical staff and
9 shall be afforded the same status as is provided information
10 concerning medical studies in Part 21 of Article VIII of the
11 Code of Civil Procedure.

12 (c) Immunity from Prosecution. An individual or
13 organization acting in good faith, and not in a wilful and
14 wanton manner, in complying with this Section ~~Title~~ by
15 providing a report or other information to the ~~APN~~ Board, by
16 assisting in the investigation or preparation of a report or
17 information, by participating in proceedings of the ~~APN~~ Board,
18 or by serving as a member of the Board shall not, as a result of
19 such actions, be subject to criminal prosecution or civil
20 damages.

21 (d) Indemnification. Members of the ~~APN~~ Board, the ~~APN~~
22 Board's attorneys, the investigative staff, advanced practice
23 nurses or physicians retained under contract to assist and
24 advise in the investigation, and authorized clerical staff
25 shall be indemnified by the State for any actions (i) occurring
26 within the scope of services on the ~~APN~~ Board, (ii) performed

1 in good faith, and (iii) not wilful and wanton in nature. The
2 Attorney General shall defend all actions taken against those
3 persons unless he or she determines either that there would be
4 a conflict of interest in the representation or that the
5 actions complained of were not performed in good faith or were
6 wilful and wanton in nature. If the Attorney General declines
7 representation, the member shall have the right to employ
8 counsel of his or her choice, whose fees shall be provided by
9 the State, after approval by the Attorney General, unless there
10 is a determination by a court that the member's actions were
11 not performed in good faith or were wilful and wanton in
12 nature. The member shall notify the Attorney General within 7
13 days of receipt of notice of the initiation of an action
14 involving services of the ~~APN~~ Board. Failure to so notify the
15 Attorney General shall constitute an absolute waiver of the
16 right to a defense and indemnification. The Attorney General
17 shall determine within 7 days after receiving the notice
18 whether he or she will undertake to represent the member.

19 (e) Deliberations of ~~APN~~ Board. Upon the receipt of a
20 report called for by this Section ~~Title~~, other than those
21 reports of impaired persons licensed under this Article ~~Title~~
22 required pursuant to the rules of the ~~APN~~ Board, the ~~APN~~ Board
23 shall notify in writing by certified mail the person who is the
24 subject of the report. The notification shall be made within 30
25 days of receipt by the ~~APN~~ Board of the report. The
26 notification shall include a written notice setting forth the

1 person's right to examine the report. Included in the
2 notification shall be the address at which the file is
3 maintained, the name of the custodian of the reports, and the
4 telephone number at which the custodian may be reached. The
5 person who is the subject of the report shall submit a written
6 statement responding to, clarifying, adding to, or proposing to
7 amend the report previously filed. The statement shall become a
8 permanent part of the file and shall be received by the ~~APN~~
9 Board no more than 30 days after the date on which the person
10 was notified of the existence of the original report. The ~~APN~~
11 Board shall review all reports received by it and any
12 supporting information and responding statements submitted by
13 persons who are the subject of reports. The review by the ~~APN~~
14 Board shall be in a timely manner but in no event shall the ~~APN~~
15 Board's initial review of the material contained in each
16 disciplinary file be less than 61 days nor more than 180 days
17 after the receipt of the initial report by the ~~APN~~ Board. When
18 the ~~APN~~ Board makes its initial review of the materials
19 contained within its disciplinary files, the ~~APN~~ Board shall,
20 in writing, make a determination as to whether there are
21 sufficient facts to warrant further investigation or action.
22 Failure to make that determination within the time provided
23 shall be deemed to be a determination that there are not
24 sufficient facts to warrant further investigation or action.
25 Should the ~~APN~~ Board find that there are not sufficient facts
26 to warrant further investigation or action, the report shall be

1 accepted for filing and the matter shall be deemed closed and
2 so reported. The individual or entity filing the original
3 report or complaint and the person who is the subject of the
4 report or complaint shall be notified in writing by the ~~APN~~
5 Board of any final action on their report or complaint.

6 (f) Summary Reports. The ~~APN~~ Board shall prepare, on a
7 timely basis, but in no event less than one every other month,
8 a summary report of final actions taken upon disciplinary files
9 maintained by the ~~APN~~ Board. The summary reports shall be made
10 available to the public upon request and payment of the fees
11 set by the Department. This publication may be made available
12 to the public on the Department's Internet website ~~sent by the~~
13 ~~APN Board to every health care facility licensed by the~~
14 ~~Department of Public Health, every professional association~~
15 ~~and society of persons licensed under this Title functioning on~~
16 ~~a statewide basis in this State, all insurers providing~~
17 ~~professional liability insurance to persons licensed under~~
18 ~~this Title in this State, and the Illinois Pharmacists~~
19 ~~Association.~~

20 (g) Any violation of this Section shall constitute a Class
21 A misdemeanor.

22 (h) If a person violates the provisions of this Section, an
23 action may be brought in the name of the People of the State of
24 Illinois, through the Attorney General of the State of
25 Illinois, for an order enjoining the violation or for an order
26 enforcing compliance with this Section. Upon filing of a

1 verified petition in court, the court may issue a temporary
2 restraining order without notice or bond and may preliminarily
3 or permanently enjoin the violation, and if it is established
4 that the person has violated or is violating the injunction,
5 the court may punish the offender for contempt of court.
6 Proceedings under this subsection shall be in addition to, and
7 not in lieu of, all other remedies and penalties provided for
8 by this Section.

9 (Source: P.A. 90-742, eff. 8-13-98.)

10 (225 ILCS 65/Art. 70 heading new) (was 225 ILCS 65/Tit.
11 20 heading)

12 Article 70 ~~TITLE 20~~. ADMINISTRATION AND ENFORCEMENT

13 (225 ILCS 65/70-5 new) (was 225 ILCS 65/10-45)

14 (Section scheduled to be repealed on January 1, 2008)

15 Sec. 70-5 ~~10-45~~. Grounds for disciplinary action.

16 (a) The Department may, ~~upon recommendation of the Board,~~
17 refuse to issue or to renew, or may revoke, suspend, place on
18 probation, reprimand, or take other disciplinary or
19 non-disciplinary action as the Department may deem
20 appropriate, including fines not to exceed \$10,000 per
21 violation, with regard to a license for any one or combination
22 of the causes set forth in subsection (b) below. ~~Fines up to~~
23 ~~\$2,500 may be imposed in conjunction with other forms of~~
24 ~~disciplinary action for those violations that result in~~

1 ~~monetary gain for the licensee. Fines shall not be the~~
2 ~~exclusive disposition of any disciplinary action arising out of~~
3 ~~conduct resulting in death or injury to a patient. Fines shall~~
4 ~~not be assessed in disciplinary actions involving mental or~~
5 ~~physical illness or impairment.~~ All fines collected under this
6 Section shall be deposited in the Nursing Dedicated and
7 Professional Fund.

8 (b) Grounds for disciplinary action include the following:

9 (1) Material deception in furnishing information to
10 the Department.

11 (2) Material violations of any provision of this Act or
12 violation of the rules of or final administrative action of
13 the Secretary ~~Director~~, after consideration of the
14 recommendation of the Board.

15 (3) Conviction by plea of guilty or nolo contendere,
16 finding of guilt, jury verdict, or entry of judgment or by
17 sentencing of any crime, including, but not limited to,
18 convictions, preceding sentences of supervision,
19 conditional discharge, or first offender probation, ~~of any~~
20 ~~crime~~ under the laws of any jurisdiction of the United
21 States: (i) that ~~which~~ is a felony; or (ii) that ~~which~~ is a
22 misdemeanor, an essential element of which is dishonesty,
23 or that ~~(iii) of any crime which~~ is directly related to the
24 practice of the profession.

25 (4) A pattern of practice or other behavior which
26 demonstrates incapacity or incompetency to practice under

1 this Act.

2 (5) Knowingly aiding or assisting another person in
3 violating any provision of this Act or rules.

4 (6) Failing, within 90 days, to provide a response to a
5 request for information in response to a written request
6 made by the Department by certified mail.

7 (7) Engaging in dishonorable, unethical or
8 unprofessional conduct of a character likely to deceive,
9 defraud or harm the public, as defined by rule.

10 (8) Unlawful taking, theft, selling, distributing, or
11 manufacturing ~~sale or distribution~~ of any drug, narcotic,
12 or prescription device, ~~or unlawful conversion of any drug,~~
13 ~~narcotic or prescription device.~~

14 (9) Habitual or excessive use or addiction to alcohol,
15 narcotics, stimulants, or any other chemical agent or drug
16 that could result ~~which results~~ in a licensee's inability
17 to practice with reasonable judgment, skill or safety.

18 (10) Discipline by another U.S. jurisdiction or
19 foreign nation, if at least one of the grounds for the
20 discipline is the same or substantially equivalent to those
21 set forth in this Section.

22 (11) A finding that the licensee, after having her or
23 his license placed on probationary status or subject to
24 conditions or restrictions, has violated the terms of
25 probation or failed to comply with such terms or
26 conditions.

1 (12) Being named as a perpetrator in an indicated
2 report by the Department of Children and Family Services
3 and under the Abused and Neglected Child Reporting Act, and
4 upon proof by clear and convincing evidence that the
5 licensee has caused a child to be an abused child or
6 neglected child as defined in the Abused and Neglected
7 Child Reporting Act.

8 (13) Willful omission to file or record, or willfully
9 impeding the filing or recording or inducing another person
10 to omit to file or record medical reports as required by
11 law or willfully failing to report an instance of suspected
12 child abuse or neglect as required by the Abused and
13 Neglected Child Reporting Act.

14 (14) Gross negligence in the practice of practical,
15 professional, or advanced practice nursing.

16 (15) Holding oneself out to be practicing nursing under
17 any name other than one's own.

18 (16) Failure of a licensee to report to the Department
19 any adverse final action taken against him or her by
20 another licensing jurisdiction of the United States or any
21 foreign state or country, any peer review body, any health
22 care institution, any professional or nursing society or
23 association, any governmental agency, any law enforcement
24 agency, or any court or a nursing liability claim related
25 to acts or conduct similar to acts or conduct that would
26 constitute grounds for action as defined in this Section.

1 (17) Failure of a licensee to report to the Department
2 surrender by the licensee of a license or authorization to
3 practice nursing or advanced practice nursing in another
4 state or jurisdiction or current surrender by the licensee
5 of membership on any nursing staff or in any nursing or
6 advanced practice nursing or professional association or
7 society while under disciplinary investigation by any of
8 those authorities or bodies for acts or conduct similar to
9 acts or conduct that would constitute grounds for action as
10 defined by this Section.

11 (18) Failing, within 60 days, to provide information in
12 response to a written request made by the Department.

13 (19) Failure to establish and maintain records of
14 patient care and treatment as required by law.

15 (20) ~~(16)~~ Fraud, deceit or misrepresentation in
16 applying for or procuring a license under this Act or in
17 connection with applying for renewal of a license under
18 this Act.

19 (21) ~~(17)~~ Allowing another person or organization to
20 use the licensees' license to deceive the public.

21 (22) ~~(18)~~ Willfully making or filing false records or
22 reports in the licensee's practice, including but not
23 limited to false records to support claims against the
24 medical assistance program of the Department of Healthcare
25 and Family Services (formerly Department of Public Aid)
26 under the Illinois Public Aid Code.

1 (23) ~~(19)~~ Attempting to subvert or cheat on a ~~nurse~~
2 licensing examination administered under this Act.

3 (24) ~~(20)~~ Immoral conduct in the commission of an act,
4 including, but not limited to, such as sexual abuse, sexual
5 misconduct, or sexual exploitation, related to the
6 licensee's practice.

7 (25) ~~(21)~~ Willfully or negligently violating the
8 confidentiality between nurse and patient except as
9 required by law.

10 (26) ~~(22)~~ Practicing under a false or assumed name,
11 except as provided by law.

12 (27) ~~(23)~~ The use of any false, fraudulent, or
13 deceptive statement in any document connected with the
14 licensee's practice.

15 (28) ~~(24)~~ Directly or indirectly giving to or receiving
16 from a person, firm, corporation, partnership, or
17 association a fee, commission, rebate, or other form of
18 compensation for professional services not actually or
19 personally rendered.

20 ~~(25) Failure of a licensee to report to the Department~~
21 ~~any adverse final action taken against such licensee by~~
22 ~~another licensing jurisdiction (any other jurisdiction of~~
23 ~~the United States or any foreign state or country), by any~~
24 ~~peer review body, by any health care institution, by any~~
25 ~~professional or nursing society or association, by any~~
26 ~~governmental agency, by any law enforcement agency, or by~~

1 ~~any court or a nursing liability claim related to acts or~~
2 ~~conduct similar to acts or conduct that would constitute~~
3 ~~grounds for action as defined in this Section.~~

4 ~~(26) Failure of a licensee to report to the Department~~
5 ~~surrender by the licensee of a license or authorization to~~
6 ~~practice nursing in another state or jurisdiction, or~~
7 ~~current surrender by the licensee of membership on any~~
8 ~~nursing staff or in any nursing or professional association~~
9 ~~or society while under disciplinary investigation by any of~~
10 ~~those authorities or bodies for acts or conduct similar to~~
11 ~~acts or conduct that would constitute grounds for action as~~
12 ~~defined by this Section.~~

13 (29) ~~(27)~~ A violation of the Health Care Worker
14 Self-Referral Act.

15 (30) ~~(28)~~ Physical illness, including but not limited
16 to deterioration through the aging process or loss of motor
17 skill, mental illness, or disability that results in the
18 inability to practice the profession with reasonable
19 judgment, skill, or safety.

20 (31) Exceeding the terms of a collaborative agreement
21 or the prescriptive authority delegated to a licensee by
22 his or her collaborating physician or podiatrist in
23 guidelines established under a written collaborative
24 agreement.

25 (32) Making a false or misleading statement regarding a
26 licensee's skill or the efficacy or value of the medicine,

1 treatment, or remedy prescribed by him or her in the course
2 of treatment.

3 (33) Prescribing, selling, administering,
4 distributing, giving, or self-administering a drug
5 classified as a controlled substance (designated product)
6 or narcotic for other than medically accepted therapeutic
7 purposes.

8 (34) Promotion of the sale of drugs, devices,
9 appliances, or goods provided for a patient in a manner to
10 exploit the patient for financial gain.

11 (35) Violating State or federal laws, rules, or
12 regulations relating to controlled substances.

13 (36) Willfully or negligently violating the
14 confidentiality between an advanced practice nurse,
15 collaborating physician, dentist, or podiatrist and a
16 patient, except as required by law.

17 (37) A violation of any provision of this Act or any
18 rules promulgated under this Act.

19 (c) The determination by a circuit court that a licensee is
20 subject to involuntary admission or judicial admission as
21 provided in the Mental Health and Developmental Disabilities
22 Code, as amended, operates as an automatic suspension. The
23 suspension will end only upon a finding by a court that the
24 patient is no longer subject to involuntary admission or
25 judicial admission and issues an order so finding and
26 discharging the patient; and upon the recommendation of the

1 Board to the Secretary ~~Director~~ that the licensee be allowed to
2 resume his or her practice.

3 (d) The Department may refuse to issue or may suspend or
4 otherwise discipline the license of any person who fails to
5 file a return, or to pay the tax, penalty or interest shown in
6 a filed return, or to pay any final assessment of the tax,
7 penalty, or interest as required by any tax Act administered by
8 the ~~Illinois~~ Department of Revenue, until such time as the
9 requirements of any such tax Act are satisfied.

10 (e) In enforcing this Act ~~Section~~, the Department or Board,
11 upon a showing of a possible violation, may compel an
12 individual licensed to practice under this Act, or who has
13 applied for licensure under this Act, to submit to a mental or
14 physical examination, or both, as required by and at the
15 expense of the Department. The Department or Board may order
16 the examining physician to present testimony concerning the
17 mental or physical examination of the licensee or applicant. No
18 information shall be excluded by reason of any common law or
19 statutory privilege relating to communications between the
20 licensee or applicant and the examining physician. The
21 examining physicians shall be specifically designated by the
22 Board or Department. The individual to be examined may have, at
23 his or her own expense, another physician of his or her choice
24 present during all aspects of this examination. Failure of an
25 individual to submit to a mental or physical examination, when
26 directed, shall result in an automatic ~~be grounds for~~

1 suspension without hearing ~~of his or her license until the~~
2 ~~individual submits to the examination if the Department finds,~~
3 ~~after notice and hearing, that the refusal to submit to the~~
4 ~~examination was without reasonable cause.~~

5 All substance-related violations shall mandate an
6 automatic substance abuse assessment. Failure to submit to an
7 assessment by a licensed physician who is certified as an
8 addictionist or an advanced practice nurse with specialty
9 certification in addictions may be grounds for an automatic
10 suspension, as defined by rule.

11 If the Department or Board finds an individual unable to
12 practice or unfit for duty because of the reasons set forth in
13 this Section, the Department or Board may require that
14 individual to submit to a substance abuse evaluation ~~care,~~
15 ~~counseling,~~ or treatment by individuals or programs ~~physicians~~
16 approved or designated by the Department or Board, as a
17 condition, term, or restriction for continued, reinstated, or
18 renewed licensure to practice; or, in lieu of evaluation ~~care,~~
19 ~~counseling,~~ or treatment, the Department may file, or the Board
20 may recommend to the Department to file, a complaint to
21 immediately suspend, revoke, or otherwise discipline the
22 license of the individual. An individual whose license was
23 granted, continued, reinstated, renewed, disciplined or
24 supervised subject to such terms, conditions, or restrictions,
25 and who fails to comply with such terms, conditions, or
26 restrictions, shall be referred to the Secretary ~~Director~~ for a

1 determination as to whether the individual shall have his or
2 her license suspended immediately, pending a hearing by the
3 Department.

4 In instances in which the Secretary ~~Director~~ immediately
5 suspends a person's license under this Section, a hearing on
6 that person's license must be convened by the Department within
7 15 days after the suspension and completed without appreciable
8 delay. The Department and Board shall have the authority to
9 review the subject individual's record of treatment and
10 counseling regarding the impairment to the extent permitted by
11 applicable federal statutes and regulations safeguarding the
12 confidentiality of medical records.

13 An individual licensed under this Act and affected under
14 this Section shall be afforded an opportunity to demonstrate to
15 the Department ~~or Board~~ that he or she can resume practice in
16 compliance with nursing ~~acceptable and prevailing~~ standards
17 under the provisions of his or her license.

18 (Source: P.A. 90-742, eff. 8-13-98; revised 12-15-05.)

19 (225 ILCS 65/70-10 new) (was 225 ILCS 65/10-50)

20 (Section scheduled to be repealed on January 1, 2008)

21 Sec. 70-10 ~~10-50~~. Intoxication and drug abuse.

22 ~~(a) A professional assistance program for nurses shall be~~
23 ~~established by January 1, 1999.~~

24 ~~(b) The Director shall appoint a task force to advise in~~
25 ~~the creation of the assistance program. The task force shall~~

1 ~~include members of the Department and professional nurses, and~~
2 ~~shall report its findings and recommendations to the Committee~~
3 ~~on Nursing.~~

4 (a) ~~(e)~~ Any registered professional nurse who is an
5 administrator or officer in any hospital, nursing home, other
6 health care agency or facility, or nurse agency and has
7 knowledge of any action or condition which reasonably indicates
8 ~~to her or him~~ that a registered professional nurse or licensed
9 practical nurse is impaired due to the use of alcohol or mood
10 altering drugs to the extent that such impairment ~~employed by~~
11 ~~or practicing nursing in such hospital, nursing home, other~~
12 ~~health care agency or facility, or nurse agency is habitually~~
13 ~~intoxicated or addicted to the use of habit-forming drugs to~~
14 ~~the extent that such intoxication or addiction adversely~~
15 affects such nurse's professional performance, or unlawfully
16 possesses, uses, distributes or converts mood altering
17 ~~habit forming~~ drugs belonging to the place of employment
18 ~~hospital, nursing home or other health care agency or facility~~
19 ~~for such nurse's own use~~, shall promptly ~~file a written~~ report
20 the individual thereof to the Department or designee of the
21 Department.; provided however, an administrator or officer
22 need not file the report if the nurse participates in a course
23 of remedial professional counseling or medical treatment for
24 substance abuse, as long as such nurse actively pursues such
25 treatment under monitoring by the administrator or officer or
26 by the hospital, nursing home, health care agency or facility,

1 or nurse agency and the nurse continues to be employed by such
2 hospital, nursing home, health care agency or facility, or
3 nurse agency. The Department shall review all reports received
4 by it in a timely manner. Its initial review shall be completed
5 no later than 60 days after receipt of the report. Within this
6 60 day period, the Department shall, in writing, make a
7 determination as to whether there are sufficient facts to
8 warrant further investigation or action. Any nurse
9 participating in mandatory reporting to the Department under
10 this Section or in good faith assisting another person in
11 making such a report shall have immunity from any liability,
12 either criminal or civil, that might result by reason of such
13 action.

14 Should the Department find insufficient facts to warrant
15 further investigation, or action, the report shall be accepted
16 for filing and the matter shall be deemed closed and so
17 reported.

18 Should the Department find sufficient facts to warrant
19 further investigation, such investigation shall be completed
20 within 60 days of the date of the determination of sufficient
21 facts to warrant further investigation or action. Final action
22 shall be determined no later than 30 days after the completion
23 of the investigation. If there is a finding which verifies
24 habitual intoxication or drug addiction which adversely
25 affects professional performance or the unlawful possession,
26 use, distribution or conversion of habit-forming drugs by the

1 reported nurse, the Department may refuse to issue or renew or
2 may suspend or revoke that nurse's license as a registered
3 professional nurse or a licensed practical nurse.

4 Any of the aforementioned actions or a determination that
5 there are insufficient facts to warrant further investigation
6 or action shall be considered a final action. The nurse
7 administrator or officer who filed the original report or
8 complaint, and the nurse who is the subject of the report,
9 shall be notified in writing by the Department within 15 days
10 of any final action taken by the Department.

11 (b) Each year on March 1, ~~commencing with the effective~~
12 ~~date of this Act,~~ the Department shall submit a report to the
13 General Assembly. The report shall include the number of
14 reports made under this Section to the Department during the
15 previous year, the number of reports reviewed and found
16 insufficient to warrant further investigation, the number of
17 reports not completed and the reasons for incompleteness. This
18 report shall be made available also to nurses requesting the
19 report.

20 (c) Any person making a report under this Section or in
21 good faith assisting another person in making such a report
22 shall have immunity from any liability, either criminal or
23 civil, that might result by reason of such action. For the
24 purpose of any legal proceeding, criminal or civil, there shall
25 be a rebuttable presumption that any person making a report
26 under this Section or assisting another person in making such

1 report was acting in good faith. All such reports and any
2 information disclosed to or collected by the Department
3 pursuant to this Section shall remain confidential records of
4 the Department and shall not be disclosed nor be subject to any
5 law or regulation of this State relating to freedom of
6 information or public disclosure of records.

7 (Source: P.A. 90-742, eff. 8-13-98.)

8 (225 ILCS 65/70-15 new)

9 Sec. 70-15. Disciplinary and non-disciplinary options for
10 the impaired nurse. The Department shall establish by rule a
11 program of care, counseling, and treatment for the impaired
12 nurse. This program shall allow an impaired nurse to self-refer
13 to the program. Individual licensee health care records shall
14 be privileged and confidential, unavailable for use in any
15 proceeding, and not subject to disclosure. Nothing in this
16 Section nor the rules adopted under this Section shall impair
17 or prohibit the Department from taking disciplinary action
18 based upon the grounds set forth in Section 70-5 of this Act.

19 (225 ILCS 65/70-20 new) (was 225 ILCS 65/20-13)

20 (Section scheduled to be repealed on January 1, 2008)

21 Sec. 70-20 ~~20-13~~. Suspension of license or registration for
22 failure to pay restitution. The Department, without further
23 process or hearing, shall suspend the license or other
24 authorization to practice of any person issued under this Act

1 who has been certified by court order as not having paid
2 restitution to a person under Section 8A-3.5 of the Illinois
3 Public Aid Code or under Section 46-1 of the Criminal Code of
4 1961. A person whose license or other authorization to practice
5 is suspended under this Section is prohibited from practicing
6 until the restitution is made in full.

7 (Source: P.A. 94-577, eff. 1-1-06.)

8 (225 ILCS 65/70-25 new) (was 225 ILCS 65/20-25)

9 (Section scheduled to be repealed on January 1, 2008)

10 Sec. 70-25 ~~20-25~~. Returned checks; fines. Any person who
11 delivers a check or other payment to the Department that is
12 returned to the Department unpaid by the financial institution
13 upon which it is drawn shall pay to the Department, in addition
14 to the amount already owed to the Department, a fine of \$50.
15 The fines imposed by this Section are in addition to any other
16 discipline provided under this Act for unlicensed practice or
17 practice on a nonrenewed license. The Department shall notify
18 the person that payment of fees and fines shall be paid to the
19 Department by certified check or money order within 30 calendar
20 days of the notification. If, after the expiration of 30 days
21 from the date of the notification, the person has failed to
22 submit the necessary remittance, the Department shall
23 automatically terminate the license or deny the application,
24 without hearing. If, after termination or denial, the person
25 seeks a license, he or she shall apply to the Department for

1 restoration or issuance of the license and pay all fees and
2 fines due to the Department. The Department may establish a fee
3 for the processing of an application for restoration of a
4 license to pay all expenses of processing this application. The
5 Secretary ~~Director~~ may waive the fines due under this Section
6 in individual cases where the Secretary ~~Director~~ finds that the
7 fines would be unreasonable or unnecessarily burdensome.

8 (Source: P.A. 92-146, eff. 1-1-02.)

9 (225 ILCS 65/70-30 new) (was 225 ILCS 65/20-30)

10 (Section scheduled to be repealed on January 1, 2008)

11 Sec. 70-30 ~~20-30~~. Roster. The Department shall maintain a
12 roster of the names and addresses of all licensees and of all
13 persons whose licenses have been suspended or revoked. This
14 roster shall be available upon written request and payment of
15 the required fees.

16 (Source: P.A. 90-742, eff. 8-13-98.)

17 (225 ILCS 65/70-35 new) (was 225 ILCS 65/20-31)

18 (Section scheduled to be repealed on January 1, 2008)

19 Sec. 70-35 ~~20-31~~. Licensure requirements; internet site.
20 The Department shall make available to the public the
21 requirements for licensure in English and Spanish on the
22 internet through the Department's World Wide Web site. This
23 information shall include the requirements for licensure of
24 individuals currently residing in another state or territory of

1 the United States or a foreign country, territory, or province.
2 The Department shall establish an e-mail link to the Department
3 for information on the requirements for licensure, with replies
4 available in English and Spanish.

5 (Source: P.A. 93-519, eff. 1-1-04.)

6 (225 ILCS 65/70-40 new) (was 225 ILCS 65/20-32)

7 (Section scheduled to be repealed on January 1, 2008)

8 Sec. 70-40 ~~20-32~~. Educational resources; internet link.

9 The Department shall work with the Board ~~of Nursing, the APN~~
10 ~~Board~~, the Board of Higher Education, the Illinois Student
11 Assistance Commission, Statewide organizations, and
12 community-based organizations to develop a list of
13 Department-approved nursing programs and other educational
14 resources related to the Test of English as a Foreign Language
15 and the Commission on Graduates of Foreign Nursing Schools
16 Examination. The Department shall provide a link to a list of
17 these resources, in English and Spanish, on the Department's
18 World Wide Web site.

19 (Source: P.A. 93-519, eff. 1-1-04.)

20 (225 ILCS 65/70-45 new) (was 225 ILCS 65/20-35)

21 (Section scheduled to be repealed on January 1, 2008)

22 Sec. 70-45 ~~20-35~~. Fees.

23 (a) The Department shall provide by rule for a schedule of
24 fees to be paid for licenses by all applicants.

1 (b) ~~(a-5)~~ Except as provided in subsection (c) of this
2 Section ~~(b)~~, the fees for the administration and enforcement of
3 this Act, including but not limited to original licensure,
4 renewal, and restoration, shall be set by rule. The fees shall
5 not be refundable.

6 (c) ~~(b)~~ In addition, applicants for any examination as a
7 Registered Professional Nurse or a Licensed Practical Nurse
8 shall be required to pay, either to the Department or to the
9 designated testing service, a fee covering the cost of
10 providing the examination. Failure to appear for the
11 examination on the scheduled date, at the time and place
12 specified, after the applicant's application for examination
13 has been received and acknowledged by the Department or the
14 designated testing service, shall result in the forfeiture of
15 the examination fee.

16 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98.)

17 (225 ILCS 65/70-50 new) (was 225 ILCS 65/20-40)

18 (Section scheduled to be repealed on January 1, 2008)

19 Sec. 70-50 ~~20-40~~. Fund.

20 (a) There is hereby created within the State Treasury the
21 Nursing Dedicated and Professional Fund. The monies in the Fund
22 may be used by and at the direction of the Department for the
23 administration and enforcement of this Act, including but not
24 limited to:

25 (1) ~~(a)~~ Distribution and publication of this Act ~~the~~

1 ~~Nursing and Advanced Practice Nursing Act~~ and the rules at
2 the time of renewal to all persons licensed by the
3 Department under this Act.

4 (2) ~~(b)~~ Employment of secretarial, nursing,
5 administrative, enforcement, and other staff for the
6 administration of this Act.

7 ~~(c) Conducting a survey, as prescribed by rule of the~~
8 ~~Department, once every 4 years during the license renewal~~
9 ~~period.~~

10 ~~(d) Conducting of training seminars for licensees~~
11 ~~under this Act relating to the obligations,~~
12 ~~responsibilities, enforcement and other provisions of the~~
13 ~~Act and its rules.~~

14 (b) ~~(e)~~ Disposition of fees ~~Fees~~:

15 (1) \$5 of every licensure fee shall be placed in a
16 fund for assistance to nurses enrolled in a diversionary
17 program as approved by the Department.

18 ~~(i) (Blank).~~

19 (2) (ii) All of the fees, and fines, and penalties
20 collected pursuant to this Act shall be deposited in the
21 Nursing Dedicated and Professional Fund.

22 (3) Each (iii) ~~For the~~ fiscal year ~~beginning July 1,~~
23 ~~1988,~~ the moneys deposited in the Nursing Dedicated and
24 Professional Fund shall be appropriated to the Department
25 for expenses of the Department and the Board in the
26 administration of this Act. All earnings received from

1 investment of moneys in the Nursing Dedicated and
2 Professional Fund shall be deposited in the Nursing
3 Dedicated and Professional Fund and shall be used for the
4 same purposes as fees deposited in the Fund.

5 (4) ~~(iv)~~ For the fiscal year beginning July 1, 2004 and
6 for each fiscal year thereafter, \$1,200,000 of the moneys
7 deposited in the Nursing Dedicated and Professional Fund
8 each year shall be set aside and appropriated to the
9 ~~Illinois~~ Department of Public Health for nursing
10 scholarships awarded pursuant to the Nursing Education
11 Scholarship Law. Representatives of the Department and the
12 Nursing Education Scholarship Program Advisory Council
13 shall review this requirement and the scholarship awards
14 every 2 years.

15 (5) ~~(v)~~ Moneys in the Fund may be transferred to the
16 Professions Indirect Cost Fund as authorized under Section
17 2105-300 of the Department of Professional Regulation Law
18 (20 ILCS 2105/2105-300).

19 (f) Moneys set aside for nursing scholarships awarded
20 pursuant to the Nursing Education Scholarship Law as provided
21 in item (iv) of subsection (e) of this Section may not be
22 transferred under Section 8h of the State Finance Act.

23 (Source: P.A. 92-46, eff. 7-1-01; 93-806, eff. 7-24-04;
24 93-1054, eff. 11-18-04; revised 12-1-04.)

25 (225 ILCS 65/70-55 new) (was 225 ILCS 65/20-50)

1 (Section scheduled to be repealed on January 1, 2008)

2 Sec. 70-55 ~~20-50~~. Statute of limitations ~~Limitation on~~
3 ~~action~~. All proceedings to suspend, revoke, or take any other
4 disciplinary action as the Department may deem proper, with
5 regard to a license on any of the ~~foregoing~~ grounds under
6 Section 70-5 of this Act may not be commenced later than 5 ~~3~~
7 years next after the commission of any act which is a ground
8 for discipline or a final conviction order for any of the acts
9 described ~~herein~~. In the event of the settlement of any claim
10 or cause of action in favor of the claimant or the reduction to
11 the final judgment of any civil action in favor of the
12 plaintiff, such claim, cause of action or civil action being
13 rounded on the allegation that a person licensed under this Act
14 was negligent in providing care, the Department shall have an
15 additional period of 2 years ~~one year~~ from the date of such
16 settlement or final judgment in which to investigate and
17 commence formal disciplinary proceedings under ~~Section 25 of~~
18 this Act, except as otherwise provided by law. The time during
19 which the holder of the license was outside the State of
20 Illinois shall not be included within any period of time
21 limiting the commencement of disciplinary action by the Board.

22 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98.)

23 (225 ILCS 65/70-60 new) (was 225 ILCS 65/20-55)

24 (Section scheduled to be repealed on January 1, 2008)

25 Sec. 70-60 ~~20-55~~. Summary suspension; ~~Suspension for~~

1 imminent danger. The Secretary ~~Director~~ of the Department may,
2 upon receipt of a written communication from the Secretary of
3 Human Services, the Director of Healthcare and Family Services
4 (formerly Director of Public Aid), or the Director of Public
5 Health that continuation of practice of a person licensed under
6 this Act constitutes an immediate danger to the public,
7 immediately suspend the license of such person without a
8 hearing. In instances in which the Secretary ~~Director~~
9 immediately suspends a license under this Section, a hearing
10 upon such person's license must be convened by the Department
11 within 30 days after such suspension and completed without
12 appreciable delay, such hearing held to determine whether to
13 recommend to the Secretary ~~Director~~ that the person's license
14 be revoked, suspended, placed on probationary status or
15 reinstated, or such person be subject to other disciplinary
16 action. In such hearing, the written communication and any
17 other evidence submitted therewith may be introduced as
18 evidence against such person; provided, however, the person, or
19 his or her counsel, shall have the opportunity to discredit or
20 impeach and submit evidence rebutting such evidence.

21 (Source: P.A. 89-507, eff. 7-1-97; 90-61, eff. 12-30-97;
22 90-742, eff. 8-13-98; revised 12-15-05.)

23 (225 ILCS 65/70-65 new) (was 225 ILCS 65/20-65)

24 (Section scheduled to be repealed on January 1, 2008)

25 Sec. 70-65 ~~20-65~~. Liability of State. In the event that the

1 Department's order of revocation, suspension, placing the
2 licensee on probationary status, or other order of formal
3 disciplinary action is without any reasonable basis, then the
4 State of Illinois shall be liable to the injured party for
5 those special damages suffered as a direct result of such
6 order.

7 (Source: P.A. 90-742, eff. 8-13-98.)

8 (225 ILCS 65/70-70 new) (was 225 ILCS 65/20-70)

9 (Section scheduled to be repealed on January 1, 2008)

10 Sec. 70-70 ~~20-70~~. Right to legal counsel. No action of a
11 disciplinary nature that is predicated on charges alleging
12 unethical or unprofessional conduct of a person who is licensed
13 under this Act ~~a registered professional nurse or a licensed~~
14 ~~practical nurse~~ and that can be reasonably expected to affect
15 adversely that person's maintenance of her or his present, or
16 her or his securing of future, employment as such a nurse may
17 be taken by the Department, ~~by any association, or by any~~
18 ~~person~~ unless the person against whom such charges are made is
19 afforded the right to be represented by legal counsel of her or
20 his choosing and to present any witness, whether an attorney or
21 otherwise to testify on matters relevant to such charges.

22 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98.)

23 (225 ILCS 65/70-75 new) (was 225 ILCS 65/20-75)

24 (Section scheduled to be repealed on January 1, 2008)

1 Sec. 70-75 ~~20-75~~. Injunctive remedies.

2 (a) If any person violates the provision of this Act, the
3 Secretary ~~Director~~ may, in the name of the People of the State
4 of Illinois, through the Attorney General of the State of
5 Illinois, or the State's Attorney of any county in which the
6 action is brought, petition for an order enjoining such
7 violation or for an order enforcing compliance with this Act.
8 Upon the filing of a verified petition in court, the court may
9 issue a temporary restraining order, without notice or bond,
10 and may preliminarily and permanently enjoin such violation,
11 and if it is established that such person has violated or is
12 violating the injunction, the court may punish the offender for
13 contempt of court. Proceedings under this Section shall be in
14 addition to, and not in lieu of, all other remedies and
15 penalties provided by this Act.

16 (b) If any person shall practice as a nurse or hold herself
17 or himself out as a nurse without being licensed under the
18 provisions of this Act, then any licensed nurse, any interested
19 party, or any person injured thereby may, in addition to the
20 Secretary ~~Director~~, petition for relief as provided in
21 subsection (a) of this Section.

22 (b-5) Whoever knowingly practices or offers to practice
23 nursing in this State without a license for that purpose shall
24 be guilty of a Class A misdemeanor and for each subsequent
25 conviction, shall be guilty of a Class 4 felony. All criminal
26 fines, monies, or other property collected or received by the

1 Department under this Section or any other State or federal
2 statute, including, but not limited to, property forfeited to
3 the Department under Section 505 of the Illinois Controlled
4 Substances Act or Section 85 of the Methamphetamine Control and
5 Community Protection Act, shall be deposited into the
6 Professional Regulation Evidence Fund.

7 (c) Whenever in the opinion of the Department any person
8 violates any provision of this Act, the Department may issue a
9 rule to show cause why an order to cease and desist should not
10 be entered against him. The rule shall clearly set forth the
11 grounds relied upon by the Department and shall provide a
12 period of 7 days from the date of the rule to file an answer to
13 the satisfaction of the Department. Failure to answer to the
14 satisfaction of the Department shall cause an order to cease
15 and desist to be issued forthwith.

16 (Source: P.A. 94-556, eff. 9-11-05.)

17 (225 ILCS 65/70-80 new) (was 225 ILCS 65/20-80)

18 (Section scheduled to be repealed on January 1, 2008)

19 Sec. 70-80 ~~20-80~~. Investigation; notice; hearing. Prior to
20 bringing an action before the Board, the Department may
21 investigate the actions of any applicant or of any person or
22 persons holding or claiming to hold a license. The Department
23 shall, before suspending, revoking, placing on probationary
24 status, or taking any other disciplinary action as the
25 Department may deem proper with regard to any license, at least

1 30 days prior to the date set for the hearing, notify the
2 accused in writing of any charges made and the time and place
3 for a hearing of the charges before the Board, direct her or
4 him to file a written answer thereto to the Board under oath
5 within 20 days after the service of such notice and inform the
6 licensee that if she or he fails to file such answer default
7 will be taken against the licensee and such license may be
8 suspended, revoked, placed on probationary status, or have
9 other disciplinary action, including limiting the scope,
10 nature or extent of her or his practice, as the Department may
11 deem proper taken with regard thereto. Such written notice may
12 be served by personal delivery or certified or registered mail
13 to the respondent at the address of her or his last
14 notification to the Department. At the time and place fixed in
15 the notice, the Department shall proceed to hear the charges
16 and the parties or their counsel shall be accorded ample
17 opportunity to present such statements, testimony, evidence
18 and argument as may be pertinent to the charges or to the
19 defense to the charges. The Department may continue a hearing
20 from time to time. In case the accused person, after receiving
21 notice, fails to file an answer, her or his license may in the
22 discretion of the Secretary ~~Director~~, having received first the
23 recommendation of the Board, be suspended, revoked, placed on
24 probationary status, or the Secretary ~~Director~~ may take
25 whatever disciplinary action as he or she may deem proper,
26 including limiting the scope, nature, or extent of said

1 person's practice, without a hearing, if the act or acts
2 charged constitute sufficient grounds for such action under
3 this Act.

4 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98.)

5 (225 ILCS 65/70-85 new) (was 225 ILCS 65/20-85)

6 (Section scheduled to be repealed on January 1, 2008)

7 Sec. 70-85 ~~20-85~~. Stenographer; transcript. The
8 Department, at its expense, shall provide a stenographer to
9 take down the testimony and preserve a record of all
10 proceedings at the hearing of any case wherein any disciplinary
11 action is taken regarding a license. The notice of hearing,
12 complaint and all other documents in the nature of pleadings
13 and written motions filed in the proceedings, the transcript of
14 testimony, the report of the Board and the orders of the
15 Department shall be the record of the proceedings. The
16 Department shall furnish a transcript of the record to any
17 person interested in the hearing upon payment of the fee
18 required under Section 2105-115 of the Department of
19 Professional Regulation Law (20 ILCS 2105/2105-115).

20 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98;
21 91-239, eff. 1-1-00.)

22 (225 ILCS 65/70-90 new) (was 225 ILCS 65/20-90)

23 (Section scheduled to be repealed on January 1, 2008)

24 Sec. 70-90 ~~20-90~~. Compelled testimony and production of

1 documents. Any circuit court may, upon application of the
2 Department or designee or of the applicant or licensee against
3 whom proceedings upon Section 70-80 ~~20-80~~ of this Act are
4 pending, enter an order requiring the attendance of witnesses
5 and their testimony, and the production of documents, papers,
6 files, books and records in connection with any hearing or
7 investigation. The court may compel obedience to its order by
8 proceedings for contempt.

9 (Source: P.A. 90-742, eff. 8-13-98.)

10 (225 ILCS 65/70-95 new) (was 225 ILCS 65/20-95)

11 (Section scheduled to be repealed on January 1, 2008)

12 Sec. 70-95 ~~20-95~~. Subpoena power; oaths. The Department
13 shall have power to subpoena and bring before it any person in
14 this State and to take testimony, either orally or by
15 deposition or both, with the same fees and mileage and in the
16 same manner as prescribed by law in judicial proceedings in
17 civil cases in circuit courts of this State.

18 The Secretary ~~Director~~ and any member of the Board
19 designated by the Secretary ~~Director~~ shall each have power to
20 administer oaths to witnesses at any hearing which the
21 Department is authorized to conduct under this Act, and any
22 other oaths required or authorized to be administered by the
23 Department under this Act.

24 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98.)

1 (225 ILCS 65/70-100 new) (was 225 ILCS 65/20-100)

2 (Section scheduled to be repealed on January 1, 2008)

3 Sec. 70-100 ~~20-100~~. Board report. At the conclusion of the
4 hearing the Board shall present to the Secretary ~~Director~~ a
5 written report of its findings of fact, conclusions of law, and
6 recommendations. The report shall contain a finding whether or
7 not the accused person violated this Act or failed to comply
8 with the conditions required in this Act. The report shall
9 specify the nature of the violation or failure to comply, and
10 the Board shall make its recommendations to the Secretary
11 ~~Director~~.

12 The report of findings of fact, conclusions of law, and
13 recommendation of the Board shall be the basis for the
14 Department's order of refusal or for the granting of a license
15 or permit unless the Secretary ~~Director~~ shall determine that
16 the report is contrary to the manifest weight of the evidence,
17 in which case the Secretary ~~Director~~ may issue an order in
18 contravention of the report. The findings are not admissible in
19 evidence against the person in a criminal prosecution brought
20 for the violation of this Act, but the hearing and findings are
21 not a bar to a criminal prosecution brought for the violation
22 of this Act.

23 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98.)

24 (225 ILCS 65/70-105 new) (was 225 ILCS 65/20-105)

25 (Section scheduled to be repealed on January 1, 2008)

1 Sec. 70-105 ~~20-105~~. Hearing officer. The Secretary
2 ~~Director~~ shall have the authority to appoint an attorney duly
3 licensed to practice law in the State of Illinois to serve as
4 the hearing officer in any formal action before the Board of
5 Nursing to revoke, suspend, place on probation, reprimand,
6 fine, or take any other disciplinary action against ~~with regard~~
7 ~~to~~ a license. The hearing officer shall have full authority to
8 conduct the formal hearing. The Board shall have the right to
9 have at least one member present at any hearing conducted by
10 such hearing officer. The Board members shall have equal or
11 greater licensing qualifications than those of the licensee
12 being prosecuted. ~~There may be present at least one RN member~~
13 ~~of the Board at any such hearing or disciplinary conference. An~~
14 ~~LPN member or LPN educator may be present for hearings and~~
15 ~~disciplinary conferences of an LPN.~~ The hearing officer shall
16 report her or his findings and recommendations to the Board
17 within 30 days of the receipt of the record. The Board shall
18 have up to 90 days from receipt of the report to review the
19 report of the hearing officer and present their findings of
20 fact, conclusions of law and recommendations to the Secretary
21 ~~Director~~. If the Board fails to present its report within the
22 90-day period, the Secretary ~~Director~~ may issue an order based
23 on the report of the hearing officer. However, if the Board
24 does present its report within the specified 90 days, the
25 Secretary's ~~Director's~~ order shall be based upon the report of
26 the Board.

1 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98.)

2 (225 ILCS 65/70-110 new) (was 225 ILCS 65/20-110)

3 (Section scheduled to be repealed on January 1, 2008)

4 Sec. 70-110 ~~20-110~~. Motion for rehearing. In any case
5 involving refusal to issue, renew, or the discipline of a
6 license, a copy of the Board's report shall be served upon the
7 respondent by the Department, either personally or as provided
8 in this Act, for the service of the notice of hearing. Within
9 20 days after such service, the respondent may present to the
10 Department a motion in writing for a rehearing, which motion
11 shall specify the particular grounds for a rehearing. If no
12 motion for rehearing is filed, then upon the expiration of the
13 time then upon such denial the Secretary ~~Director~~ may enter an
14 order in accordance with recommendations of the Board except as
15 provided in Sections 70-100 ~~20-100~~ and 70-105 ~~20-105~~ of this
16 Act. If the respondent shall order from the reporting service,
17 and pay for a transcript of the record within the time for
18 filing a motion for rehearing, the 20 day period within which
19 such a motion may be filed shall commence upon the delivery of
20 the transcript to the respondent.

21 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98.)

22 (225 ILCS 65/70-115 new) (was 225 ILCS 65/20-115)

23 (Section scheduled to be repealed on January 1, 2008)

24 Sec. 70-115 ~~20-115~~. Order for rehearing. Whenever the

1 Secretary Director is satisfied that substantial justice has
2 not been done in the revocation, suspension, or refusal to
3 issue or renew a license, the Secretary Director may order a
4 hearing by the same or another hearing officer or the Board.

5 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98.)

6 (225 ILCS 65/70-120 new) (was 225 ILCS 65/20-120)

7 (Section scheduled to be repealed on January 1, 2008)

8 Sec. 70-120 ~~20-120~~. Order of Secretary Director. An order
9 regarding any disciplinary action or a certified copy thereof,
10 over the seal of the Department and purporting to be signed by
11 the Secretary Director, shall be prima facie evidence that:

12 (a) the signature is the genuine signature of the
13 Secretary Director;

14 (b) the Secretary Director is duly appointed and
15 qualified; and

16 (c) the Board and the Board members are qualified to
17 act.

18 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98;
19 91-357, eff. 7-29-99.)

20 (225 ILCS 65/70-125 new) (was 225 ILCS 65/20-125)

21 (Section scheduled to be repealed on January 1, 2008)

22 Sec. 70-125 ~~20-125~~. Restoration after suspension or
23 revocation. At any time after the suspension or revocation of
24 any license, the Department may restore it to the accused

1 person unless, after an investigation and a hearing, the
2 Department determines that restoration is not in the public
3 interest.

4 (Source: P.A. 90-742, eff. 8-13-98.)

5 (225 ILCS 65/70-130 new) (was 225 ILCS 65/20-130)

6 (Section scheduled to be repealed on January 1, 2008)

7 Sec. 70-130 ~~20-130~~. Surrender of license. Upon revocation
8 or suspension of any license, the licensee shall forthwith
9 surrender the license to the Department and if the licensee
10 fails to do so, the Department shall have the right to seize
11 the license.

12 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98.)

13 (225 ILCS 65/70-135 new) (was 225 ILCS 65/20-135)

14 (Section scheduled to be repealed on January 1, 2008)

15 Sec. 70-135 ~~20-135~~. Temporary suspension. The Secretary
16 ~~Director~~ may temporarily suspend the license of a licensee
17 ~~nurse~~ without a hearing, simultaneously with the institution of
18 proceedings for a hearing provided for in Section 70-80 ~~20-80~~
19 of this Act, if the Secretary ~~Director~~ finds that evidence in
20 his or her possession indicates that continuation in practice
21 would constitute an imminent danger to the public. In the event
22 that the Secretary ~~Director~~ suspends, temporarily, this
23 license without a hearing, a hearing by the Department must be
24 held within 30 days after the suspension has occurred, and be

1 concluded without appreciable delay.

2 Proceedings for judicial review shall be commenced in the
3 circuit court of the county in which the party applying for
4 review resides; but if the party is not a resident of this
5 State, the venue shall be in Sangamon County.

6 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98.)

7 (225 ILCS 65/70-140 new) (was 225 ILCS 65/20-140)

8 (Section scheduled to be repealed on January 1, 2008)

9 Sec. 70-140 ~~20-140~~. Administrative Review Law. All final
10 administrative decisions of the Department hereunder shall be
11 subject to judicial review pursuant to the revisions of the
12 Administrative Review Law, and all amendments and
13 modifications thereof, and the rule adopted pursuant thereto.
14 The term "administrative decision" is defined as in Section
15 3-101 of the Code of Civil Procedure.

16 (Source: P.A. 90-742, eff. 8-13-98.)

17 (225 ILCS 65/70-145 new) (was 225 ILCS 65/20-145)

18 (Section scheduled to be repealed on January 1, 2008)

19 Sec. 70-145 ~~20-145~~. Certification of record. The
20 Department shall not be required to certify any record to the
21 Court or file any answer in court or otherwise appear in any
22 court in a judicial review proceeding, unless there is filed in
23 the court, with the complaint, a receipt from the Department
24 acknowledging payment of the costs of furnishing and certifying

1 the record. Failure on the part of the plaintiff to file such
2 receipt in Court shall be grounds for dismissal of the action.

3 (Source: P.A. 90-742, eff. 8-13-98.)

4 (225 ILCS 65/70-150 new) (was 225 ILCS 65/20-150)

5 (Section scheduled to be repealed on January 1, 2008)

6 Sec. 70-150 ~~20-150~~. Criminal penalties. Any person who is
7 found to have violated any provision of this Act is guilty of a
8 Class A misdemeanor. On conviction of a second or subsequent
9 offense, the violator shall be guilty of a Class 4 felony.

10 (Source: P.A. 90-742, eff. 8-13-98.)

11 (225 ILCS 65/70-155 new) (was 225 ILCS 65/20-155)

12 (Section scheduled to be repealed on January 1, 2008)

13 Sec. 70-155 ~~20-155~~. Pending actions. All disciplinary
14 actions taken or pending pursuant to the Illinois Nursing Act,
15 approved June 14, 1951, as amended, shall, for the actions
16 taken, remain in effect, and for the actions pending, shall be
17 continued, on the effective date of this Act without having
18 separate actions filed by the Department.

19 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98.)

20 (225 ILCS 65/70-160 new) (was 225 ILCS 65/20-160)

21 (Section scheduled to be repealed on January 1, 2008)

22 Sec. 70-160 ~~20-160~~. Illinois Administrative Procedure Act.
23 The Illinois Administrative Procedure Act is hereby expressly

1 adopted and incorporated herein as if all of the provisions of
2 that Act were included in this Act, except that the provision
3 of subsection (d) of Section 10-65 of the Illinois
4 Administrative Procedure Act that provides that at hearings the
5 licensee has the right to show compliance with all lawful
6 requirements for retention, continuation or renewal of the
7 license is specifically excluded. For the purposes of this Act,
8 the notice required under Section 10-25 of the Illinois
9 Administrative Procedure Act is deemed sufficient when mailed
10 to the last known address of a party.

11 (Source: P.A. 90-742, eff. 8-13-98.)

12 (225 ILCS 65/70-165 new) (was 225 ILCS 65/20-165)

13 (Section scheduled to be repealed on January 1, 2008)

14 Sec. 70-165 ~~20-165~~. Home rule preemption. It is declared to
15 be the public policy of this State, pursuant to paragraph (h)
16 of Section 6 of Article VII of the Illinois Constitution of
17 1970, that any power or function set forth in this Act to be
18 exercised by the State is an exclusive State power or function.
19 Such power or function shall not be exercised concurrently,
20 either directly or indirectly, by any unit of local government,
21 including home rule units, except as otherwise provided in this
22 Act.

23 (Source: P.A. 92-651, eff. 7-11-02.)

24 (225 ILCS 65/Art. 75 heading new) (was 225 ILCS 65/Tit.

1 17 heading)

2 ARTICLE 75 ~~TITLE 17~~. ILLINOIS CENTER FOR NURSING

3 (Source: P.A. 94-1020, eff. 7-11-06.)

4 (225 ILCS 65/75-5 new) (was 225 ILCS 65/17-5)

5 (Section scheduled to be repealed on January 1, 2008)

6 Sec. 75-5 ~~17-5~~. Definitions. In this Article ~~Title~~:

7 "Advisory Board" means the Center for Nursing Advisory
8 Board.

9 "Center" means the Illinois Center for Nursing.

10 (Source: P.A. 94-1020, eff. 7-11-06.)

11 (225 ILCS 65/75-10 new) (was 225 ILCS 65/17-10)

12 (Section scheduled to be repealed on January 1, 2008)

13 Sec. 75-10 ~~17-10~~. Illinois Center for Nursing. There is
14 created the Illinois Center for Nursing to address issues of
15 supply and demand in the nursing profession, including issues
16 of recruitment, retention, and utilization of nurse manpower
17 resources. The General Assembly finds that the Center will
18 enhance the delivery of quality health care services by
19 providing an ongoing strategy for the allocation of the State's
20 resources directed towards nursing. Each of the following
21 objectives shall serve as the primary goals for the Center:

22 (1) To develop a strategic plan for nursing manpower in
23 Illinois by selecting priorities that must be addressed.

24 (2) To convene various groups of representatives of

1 nurses, other health care providers, businesses and
2 industries, consumers, legislators, and educators to:

3 (A) review and comment on data analysis prepared
4 for the Center;

5 (B) recommend systemic changes, including
6 strategies for implementation of recommended changes;
7 and

8 (C) evaluate and report the results of the Advisory
9 Board's efforts to the General Assembly and others.

10 (3) To enhance and promote recognition, reward, and
11 renewal activities for nurses in Illinois by:

12 (A) proposing and creating reward, recognition,
13 and renewal activities for nursing; and

14 (B) promoting media and positive image-building
15 efforts for nursing.

16 (Source: P.A. 94-1020, eff. 7-11-06.)

17 (225 ILCS 65/75-15 new) (was 225 ILCS 65/17-15)

18 (Section scheduled to be repealed on January 1, 2008)

19 Sec. 75-15 ~~17-15~~. Center for Nursing Advisory Board.

20 (a) There is created the Center for Nursing Advisory Board,
21 which shall consist of 11 members appointed by the Governor,
22 with 6 members of the Advisory Board being nurses
23 representative of various nursing specialty areas. The other 5
24 members may include representatives of associations, health
25 care providers, nursing educators, and consumers. The Advisory

1 Board shall be chaired by the Nursing Act Coordinator, who
2 shall be a voting member of the Advisory Board.

3 (b) The membership of the Advisory Board shall reasonably
4 reflect representation from the geographic areas in this State.

5 (c) Members of the Advisory Board appointed by the Governor
6 shall serve for terms of 4 years, with no member serving more
7 than 10 successive years, except that, initially, 4 members
8 shall be appointed to the Advisory Board for terms that expire
9 on June 30, 2009, 4 members shall be appointed to the Advisory
10 Board for terms that expire on June 30, 2008, and 3 members
11 shall be appointed to the Advisory Board for terms that expire
12 on June 30, 2007. A member shall serve until his or her
13 successor is appointed and has qualified. Vacancies shall be
14 filled in the same manner as original appointments, and any
15 member so appointed shall serve during the remainder of the
16 term for which the vacancy occurred.

17 (d) A quorum of the Advisory Board shall consist of a
18 majority of Advisory Board members currently serving. A
19 majority vote of the quorum is required for Advisory Board
20 decisions. A vacancy in the membership of the Advisory Board
21 shall not impair the right of a quorum to exercise all of the
22 rights and perform all of the duties of the Advisory Board.

23 (e) The Governor may remove any appointed member of the
24 Advisory Board for misconduct, incapacity, or neglect of duty
25 and shall be the sole judge of the sufficiency of the cause for
26 removal.

1 (f) Members of the Advisory Board are immune from suit in
2 any action based upon any activities performed in good faith as
3 members of the Advisory Board.

4 (e) Members of the Advisory Board shall not receive
5 compensation, but shall be reimbursed for actual traveling,
6 incidentals, and expenses necessarily incurred in carrying out
7 their duties as members of the Advisory Board, as approved by
8 the Department.

9 (Source: P.A. 94-1020, eff. 7-11-06.)

10 (225 ILCS 65/75-20 new) (was 225 ILCS 65/17-20)

11 (Section scheduled to be repealed on January 1, 2008)

12 Sec. 75-20 ~~17-20~~. Powers and duties of the Advisory Board.

13 (a) The Advisory Board shall be advisory to the Department
14 and shall possess and perform each of the following powers and
15 duties:

16 (1) determine operational policy;

17 (2) administer grants, scholarships, internships, and
18 other programs, as defined by rule, including the
19 administration of programs, as determined by law, that
20 further those goals set forth in Section 75-10 ~~17-10~~ of
21 this Article ~~Title~~, in consultation with other State
22 agencies, as provided by law;

23 (3) establish committees of the Advisory Board as
24 needed;

25 (4) recommend the adoption and, from time to time, the

1 revision of those rules that may be adopted and necessary
2 to carry out the provisions of this Act;

3 (5) implement the major functions of the Center, as
4 established in the goals set forth in Section 75-10 ~~17-10~~
5 of this Article ~~Title~~; and

6 (6) seek and accept non-State funds for carrying out
7 the policy of the Center.

8 (b) The Center shall work in consultation with other State
9 agencies as necessary.

10 (Source: P.A. 94-1020, eff. 7-11-06.)

11 Section 130. The Nursing Home Administrators Licensing and
12 Disciplinary Act is amended by changing Section 4 as follows:

13 (225 ILCS 70/4) (from Ch. 111, par. 3654)

14 (Section scheduled to be repealed on January 1, 2008)

15 Sec. 4. Definitions. For purposes of this Act, the
16 following definitions shall have the following meanings,
17 except where the context requires otherwise:

18 (1) "Act" means the Nursing Home Administrators
19 Licensing and Disciplinary Act.

20 (2) "Department" means the Department of Professional
21 Regulation.

22 (3) "Director" means the Director of Professional
23 Regulation.

24 (4) "Board" means the Nursing Home Administrators

1 Licensing and Disciplinary Board appointed by the
2 Governor.

3 (5) "Nursing home administrator" means the individual
4 licensed under this Act and directly responsible for
5 planning, organizing, directing and supervising the
6 operation of a nursing home, or who in fact performs such
7 functions, whether or not such functions are delegated to
8 one or more other persons.

9 (6) "Nursing home" or "facility" means any entity that
10 is required to be licensed by the Department of Public
11 Health under the Nursing Home Care Act, as amended, other
12 than a sheltered care home as defined thereunder, and
13 includes private homes, institutions, buildings,
14 residences, or other places, whether operated for profit or
15 not, irrespective of the names attributed to them, county
16 homes for the infirm and chronically ill operated pursuant
17 to the County Nursing Home Act, as amended, and any similar
18 institutions operated by a political subdivision of the
19 State of Illinois that provide, though their ownership or
20 management, maintenance, personal care, and nursing for 3
21 or more persons, not related to the owner by blood or
22 marriage, or any similar facilities in which maintenance is
23 provided to 3 or more persons who by reason of illness of
24 physical infirmity require personal care and nursing.

25 (7) "Maintenance" means food, shelter and laundry.

26 (8) "Personal care" means assistance with meals,

1 dressing, movement, bathing, or other personal needs, or
2 general supervision of the physical and mental well-being
3 of an individual who because of age, physical, or mental
4 disability, emotion or behavior disorder, or mental
5 retardation is incapable of managing his or her person,
6 whether or not a guardian has been appointed for such
7 individual. For the purposes of this Act, this definition
8 does not include the professional services of a nurse.

9 (9) "Nursing" means professional nursing or practical
10 nursing, as those terms are defined in the Nurse Practice
11 Act ~~Nursing and Advanced Practice Nursing Act~~, for sick or
12 infirm persons who are under the care and supervision of
13 licensed physicians or dentists.

14 (10) "Disciplinary action" means revocation,
15 suspension, probation, supervision, reprimand, required
16 education, fines or any other action taken by the
17 Department against a person holding a license.

18 (11) "Impaired" means the inability to practice with
19 reasonable skill and safety due to physical or mental
20 disabilities as evidenced by a written determination or
21 written consent based on clinical evidence including
22 deterioration through the aging process or loss of motor
23 skill, or abuse of drugs or alcohol, of sufficient degree
24 to diminish a person's ability to administer a nursing
25 home.

26 (Source: P.A. 90-61, eff. 12-30-97; 90-742, eff. 8-13-98.)

1 Section 135. The Pharmacy Practice Act of 1987 is amended
2 by changing Section 4 as follows:

3 (225 ILCS 85/4) (from Ch. 111, par. 4124)

4 (Section scheduled to be repealed on January 1, 2008)

5 Sec. 4. Exemptions. Nothing contained in any Section of
6 this Act shall apply to, or in any manner interfere with:

7 (a) the lawful practice of any physician licensed to
8 practice medicine in all of its branches, dentist, podiatrist,
9 veterinarian, or therapeutically or diagnostically certified
10 optometrist within the limits of his or her license, or prevent
11 him or her from supplying to his or her bona fide patients such
12 drugs, medicines, or poisons as may seem to him appropriate;

13 (b) the sale of compressed gases;

14 (c) the sale of patent or proprietary medicines and
15 household remedies when sold in original and unbroken packages
16 only, if such patent or proprietary medicines and household
17 remedies be properly and adequately labeled as to content and
18 usage and generally considered and accepted as harmless and
19 nonpoisonous when used according to the directions on the
20 label, and also do not contain opium or coca leaves, or any
21 compound, salt or derivative thereof, or any drug which,
22 according to the latest editions of the following authoritative
23 pharmaceutical treatises and standards, namely, The United
24 States Pharmacopoeia/National Formulary (USP/NF), the United

1 States Dispensatory, and the Accepted Dental Remedies of the
2 Council of Dental Therapeutics of the American Dental
3 Association or any or either of them, in use on the effective
4 date of this Act, or according to the existing provisions of
5 the Federal Food, Drug, and Cosmetic Act and Regulations of the
6 Department of Health and Human Services, Food and Drug
7 Administration, promulgated thereunder now in effect, is
8 designated, described or considered as a narcotic, hypnotic,
9 habit forming, dangerous, or poisonous drug;

10 (d) the sale of poultry and livestock remedies in original
11 and unbroken packages only, labeled for poultry and livestock
12 medication;

13 (e) the sale of poisonous substances or mixture of
14 poisonous substances, in unbroken packages, for nonmedicinal
15 use in the arts or industries or for insecticide purposes;
16 provided, they are properly and adequately labeled as to
17 content and such nonmedicinal usage, in conformity with the
18 provisions of all applicable federal, state and local laws and
19 regulations promulgated thereunder now in effect relating
20 thereto and governing the same, and those which are required
21 under such applicable laws and regulations to be labeled with
22 the word "Poison", are also labeled with the word "Poison"
23 printed thereon in prominent type and the name of a readily
24 obtainable antidote with directions for its administration;

25 (f) the delegation of limited prescriptive authority by a
26 physician licensed to practice medicine in all its branches to

1 a physician assistant under Section 7.5 of the Physician
2 Assistant Practice Act of 1987. This delegated authority under
3 Section 7.5 of the Physician Assistant Practice Act of 1987 may
4 but is not required to include prescription of ~~Schedule III,~~
5 ~~IV, or V~~ controlled substances, as defined in Article II of the
6 Illinois Controlled Substances Act, in accordance with written
7 guidelines ~~under Section 7.5 of the Physician Assistant~~
8 ~~Practice Act of 1987~~; and

9 (g) The delegation of ~~limited~~ prescriptive authority by a
10 physician licensed to practice medicine in all its branches to
11 an advanced practice nurse in accordance with a written
12 collaborative agreement under Section 65-35 of the Nurse
13 Practice Act ~~Sections 15-15 and 15-20 of the Nursing and~~
14 ~~Advanced Practice Nursing Act~~. This ~~delegated~~ authority, which
15 is delegated under Section 65-40 of the Nurse Practice Act, may
16 but is not required to include the prescription of Schedule
17 III, IV, or V controlled substances as defined in Article II of
18 the Illinois Controlled Substances Act.

19 (Source: P.A. 90-116, eff. 7-14-97; 90-253, eff. 7-29-97;
20 90-655, eff. 7-30-98; 90-742, eff. 8-13-98.)

21 Section 140. The Illinois Physical Therapy Act is amended
22 by changing Section 1 as follows:

23 (225 ILCS 90/1) (from Ch. 111, par. 4251)

24 (Section scheduled to be repealed on January 1, 2016)

1 Sec. 1. Definitions. As used in this Act:

2 (1) "Physical therapy" means all of the following:

3 (A) Examining, evaluating, and testing individuals who
4 may have mechanical, physiological, or developmental
5 impairments, functional limitations, disabilities, or
6 other health and movement-related conditions, classifying
7 these disorders, determining a rehabilitation prognosis
8 and plan of therapeutic intervention, and assessing the
9 on-going effects of the interventions.

10 (B) Alleviating impairments, functional limitations,
11 or disabilities by designing, implementing, and modifying
12 therapeutic interventions that may include, but are not
13 limited to, the evaluation or treatment of a person through
14 the use of the effective properties of physical measures
15 and heat, cold, light, water, radiant energy, electricity,
16 sound, and air and use of therapeutic massage, therapeutic
17 exercise, mobilization, and rehabilitative procedures,
18 with or without assistive devices, for the purposes of
19 preventing, correcting, or alleviating a physical or
20 mental impairment, functional limitation, or disability.

21 (C) Reducing the risk of injury, impairment,
22 functional limitation, or disability, including the
23 promotion and maintenance of fitness, health, and
24 wellness.

25 (D) Engaging in administration, consultation,
26 education, and research.

1 Physical therapy includes, but is not limited to: (a)
2 performance of specialized tests and measurements, (b)
3 administration of specialized treatment procedures, (c)
4 interpretation of referrals from physicians, dentists,
5 advanced practice nurses, physician assistants, and
6 podiatrists, (d) establishment, and modification of physical
7 therapy treatment programs, (e) administration of topical
8 medication used in generally accepted physical therapy
9 procedures when such medication is prescribed by the patient's
10 physician, licensed to practice medicine in all its branches,
11 the patient's physician licensed to practice podiatric
12 medicine, the patient's advanced practice nurse, the patient's
13 physician assistant, or the patient's dentist, and (f)
14 supervision or teaching of physical therapy. Physical therapy
15 does not include radiology, electrosurgery, chiropractic
16 technique or determination of a differential diagnosis;
17 provided, however, the limitation on determining a
18 differential diagnosis shall not in any manner limit a physical
19 therapist licensed under this Act from performing an evaluation
20 pursuant to such license. Nothing in this Section shall limit a
21 physical therapist from employing appropriate physical therapy
22 techniques that he or she is educated and licensed to perform.
23 A physical therapist shall refer to a licensed physician,
24 advanced practice nurse, physician assistant, dentist, or
25 podiatrist any patient whose medical condition should, at the
26 time of evaluation or treatment, be determined to be beyond the

1 scope of practice of the physical therapist.

2 (2) "Physical therapist" means a person who practices
3 physical therapy and who has met all requirements as provided
4 in this Act.

5 (3) "Department" means the Department of Professional
6 Regulation.

7 (4) "Director" means the Director of Professional
8 Regulation.

9 (5) "Board" means the Physical Therapy Licensing and
10 Disciplinary Board approved by the Director.

11 (6) "Referral" means a written or oral authorization for
12 physical therapy services for a patient by a physician,
13 dentist, advanced practice nurse, physician assistant, or
14 podiatrist who maintains medical supervision of the patient and
15 makes a diagnosis or verifies that the patient's condition is
16 such that it may be treated by a physical therapist.

17 (7) "Documented current and relevant diagnosis" for the
18 purpose of this Act means a diagnosis, substantiated by
19 signature or oral verification of a physician, dentist,
20 advanced practice nurse, physician assistant, or podiatrist,
21 that a patient's condition is such that it may be treated by
22 physical therapy as defined in this Act, which diagnosis shall
23 remain in effect until changed by the physician, dentist,
24 advanced practice nurse, physician assistant, or podiatrist.

25 (8) "State" includes:

26 (a) the states of the United States of America;

1 (b) the District of Columbia; and

2 (c) the Commonwealth of Puerto Rico.

3 (9) "Physical therapist assistant" means a person licensed
4 to assist a physical therapist and who has met all requirements
5 as provided in this Act and who works under the supervision of
6 a licensed physical therapist to assist in implementing the
7 physical therapy treatment program as established by the
8 licensed physical therapist. The patient care activities
9 provided by the physical therapist assistant shall not include
10 the interpretation of referrals, evaluation procedures, or the
11 planning or major modification of patient programs.

12 (10) "Physical therapy aide" means a person who has
13 received on the job training, specific to the facility in which
14 he is employed, but who has not completed an approved physical
15 therapist assistant program.

16 (11) "Advanced practice nurse" means a person licensed
17 under the Nurse Practice Act ~~Nursing and Advanced Practice~~
18 ~~Nursing Act~~ who has a collaborative agreement with a
19 collaborating physician that authorizes referrals to physical
20 therapists.

21 (12) "Physician assistant" means a person licensed under
22 the Physician Assistant Practice Act of 1987 who has been
23 delegated authority to make referrals to physical therapists.

24 (Source: P.A. 93-1010, eff. 8-24-04; 94-651, eff. 1-1-06.)

25 Section 143. The Podiatric Medical Practice Act of 1987 is

1 amended by adding Section 20.5 as follows:

2 (225 ILCS 100/20.5 new)

3 Sec. 20.5. Delegation of authority to advanced practice
4 nurses.

5 (a) A podiatrist in active clinical practice may
6 collaborate with an advanced practice nurse in accordance with
7 the requirements of the Nurse Practice Act. Collaboration shall
8 be for the purpose of providing podiatric consultation and no
9 employment relationship shall be required. A written
10 collaborative agreement shall conform to the requirements of
11 Section 65-35 of the Nurse Practice Act. The written
12 collaborative agreement shall be for services the
13 collaborating podiatrist generally provides to his or her
14 patients in the normal course of clinical podiatric practice,
15 except as set forth in item (3) of this subsection (a). A
16 written collaborative agreement and podiatric collaboration
17 and consultation shall be adequate with respect to advanced
18 practice nurses if all of the following apply:

19 (1) The agreement is written to promote the exercise of
20 professional judgment by the advanced practice nurse
21 commensurate with his or her education and experience. The
22 agreement need not describe the exact steps that an
23 advanced practice nurse must take with respect to each
24 specific condition, disease, or symptom, but must specify
25 which procedures require a podiatrist's presence as the

1 procedures are being performed.

2 (2) Practice guidelines and orders are developed and
3 approved jointly by the advanced practice nurse and
4 collaborating podiatrist, as needed, based on the practice
5 of the practitioners. Such guidelines and orders and the
6 patient services provided thereunder are periodically
7 reviewed by the collaborating podiatrist.

8 (3) The advance practice nurse provides services that
9 the collaborating podiatrist generally provides to his or
10 her patients in the normal course of clinical practice.
11 With respect to the provision of anesthesia services by a
12 certified registered nurse anesthetist, the collaborating
13 podiatrist must have training and experience in the
14 delivery of anesthesia consistent with Department rules.

15 (4) The collaborating podiatrist and the advanced
16 practice nurse meet in person at least once a month to
17 provide collaboration and consultation.

18 (5) Methods of communication are available with the
19 collaborating podiatrist in person or through
20 telecommunications for consultation, collaboration, and
21 referral as needed to address patient care needs.

22 (6) With respect to the provision of anesthesia
23 services by a certified registered nurse anesthetist, an
24 anesthesiologist, physician, or podiatrist shall
25 participate through discussion of and agreement with the
26 anesthesia plan and shall remain physically present and be

1 available on the premises during the delivery of anesthesia
2 services for diagnosis, consultation, and treatment of
3 emergency medical conditions. The anesthesiologist or
4 operating podiatrist must agree with the anesthesia plan
5 prior to the delivery of services.

6 (7) The agreement contains provisions detailing notice
7 for termination or change of status involving a written
8 collaborative agreement, except when such notice is given
9 for just cause.

10 (b) The collaborating podiatrist shall have access to the
11 records of all patients attended to by an advanced practice
12 nurse.

13 (c) Nothing in this Section shall be construed to limit the
14 delegation of tasks or duties by a podiatrist to a licensed
15 practical nurse, a registered professional nurse, or other
16 persons.

17 (d) A podiatrist shall not be liable for the acts or
18 omissions of an advanced practice nurse solely on the basis of
19 having signed guidelines or a collaborative agreement, an
20 order, a standing order, a standing delegation order, or other
21 order or guideline authorizing an advanced practice nurse to
22 perform acts, unless the podiatrist has reason to believe the
23 advanced practice nurse lacked the competency to perform the
24 act or acts or commits willful or wanton misconduct.

25 Section 145. The Respiratory Care Practice Act is amended

1 by changing Section 10 as follows:

2 (225 ILCS 106/10)

3 (Section scheduled to be repealed on January 1, 2016)

4 Sec. 10. Definitions. In this Act:

5 "Advanced practice nurse" means an advanced practice nurse
6 licensed under the Nurse Practice Act ~~Nursing and Advanced~~
7 ~~Practice Nursing Act.~~

8 "Board" means the Respiratory Care Board appointed by the
9 Director.

10 "Basic respiratory care activities" means and includes all
11 of the following activities:

12 (1) Cleaning, disinfecting, and sterilizing equipment
13 used in the practice of respiratory care as delegated by a
14 licensed health care professional or other authorized
15 licensed personnel.

16 (2) Assembling equipment used in the practice of
17 respiratory care as delegated by a licensed health care
18 professional or other authorized licensed personnel.

19 (3) Collecting and reviewing patient data through
20 non-invasive means, provided that the collection and
21 review does not include the individual's interpretation of
22 the clinical significance of the data. Collecting and
23 reviewing patient data includes the performance of pulse
24 oximetry and non-invasive monitoring procedures in order
25 to obtain vital signs and notification to licensed health

1 care professionals and other authorized licensed personnel
2 in a timely manner.

3 (4) Maintaining a nasal cannula or face mask for oxygen
4 therapy in the proper position on the patient's face.

5 (5) Assembling a nasal cannula or face mask for oxygen
6 therapy at patient bedside in preparation for use.

7 (6) Maintaining a patient's natural airway by
8 physically manipulating the jaw and neck, suctioning the
9 oral cavity, or suctioning the mouth or nose with a bulb
10 syringe.

11 (7) Performing assisted ventilation during emergency
12 resuscitation using a manual resuscitator.

13 (8) Using a manual resuscitator at the direction of a
14 licensed health care professional or other authorized
15 licensed personnel who is present and performing routine
16 airway suctioning. These activities do not include care of
17 a patient's artificial airway or the adjustment of
18 mechanical ventilator settings while a patient is
19 connected to the ventilator.

20 "Basic respiratory care activities" does not mean activities
21 that involve any of the following:

22 (1) Specialized knowledge that results from a course of
23 education or training in respiratory care.

24 (2) An unreasonable risk of a negative outcome for the
25 patient.

26 (3) The assessment or making of a decision concerning

1 patient care.

2 (4) The administration of aerosol medication or
3 oxygen.

4 (5) The insertion and maintenance of an artificial
5 airway.

6 (6) Mechanical ventilatory support.

7 (7) Patient assessment.

8 (8) Patient education.

9 "Department" means the Department of Professional
10 Regulation.

11 "Director" means the Director of Professional Regulation.

12 "Licensed" means that which is required to hold oneself out
13 as a respiratory care practitioner as defined in this Act.

14 "Licensed health care professional" means a physician
15 licensed to practice medicine in all its branches, an advanced
16 practice nurse who has a written collaborative agreement with a
17 collaborating physician that authorizes the advanced practice
18 nurse to transmit orders to a respiratory care practitioner, or
19 a physician assistant who has been delegated the authority to
20 transmit orders to a respiratory care practitioner by his or
21 her supervising physician.

22 "Order" means a written, oral, or telecommunicated
23 authorization for respiratory care services for a patient by
24 (i) a licensed health care professional who maintains medical
25 supervision of the patient and makes a diagnosis or verifies
26 that the patient's condition is such that it may be treated by

1 a respiratory care practitioner or (ii) a certified registered
2 nurse anesthetist in a licensed hospital or ambulatory surgical
3 treatment center.

4 "Other authorized licensed personnel" means a licensed
5 respiratory care practitioner, a licensed registered nurse, or
6 a licensed practical nurse whose scope of practice authorizes
7 the professional to supervise an individual who is not
8 licensed, certified, or registered as a health professional.

9 "Proximate supervision" means a situation in which an
10 individual is responsible for directing the actions of another
11 individual in the facility and is physically close enough to be
12 readily available, if needed, by the supervised individual.

13 "Respiratory care" and "cardiorespiratory care" mean
14 preventative services, evaluation and assessment services,
15 therapeutic services, and rehabilitative services under the
16 order of a licensed health care professional or a certified
17 registered nurse anesthetist in a licensed hospital for an
18 individual with a disorder, disease, or abnormality of the
19 cardiopulmonary system. These terms include, but are not
20 limited to, measuring, observing, assessing, and monitoring
21 signs and symptoms, reactions, general behavior, and general
22 physical response of individuals to respiratory care services,
23 including the determination of whether those signs, symptoms,
24 reactions, behaviors, or general physical responses exhibit
25 abnormal characteristics; the administration of
26 pharmacological and therapeutic agents related to respiratory

1 care services; the collection of blood specimens and other
2 bodily fluids and tissues for, and the performance of,
3 cardiopulmonary diagnostic testing procedures, including, but
4 not limited to, blood gas analysis; development,
5 implementation, and modification of respiratory care treatment
6 plans based on assessed abnormalities of the cardiopulmonary
7 system, respiratory care guidelines, referrals, and orders of a
8 licensed health care professional; application, operation, and
9 management of mechanical ventilatory support and other means of
10 life support; and the initiation of emergency procedures under
11 the rules promulgated by the Department. A respiratory care
12 practitioner shall refer to a physician licensed to practice
13 medicine in all its branches any patient whose condition, at
14 the time of evaluation or treatment, is determined to be beyond
15 the scope of practice of the respiratory care practitioner.

16 "Respiratory care education program" means a course of
17 academic study leading to eligibility for registry or
18 certification in respiratory care. The training is to be
19 approved by an accrediting agency recognized by the Board and
20 shall include an evaluation of competence through a
21 standardized testing mechanism that is determined by the Board
22 to be both valid and reliable.

23 "Respiratory care practitioner" means a person who is
24 licensed by the Department of Professional Regulation and meets
25 all of the following criteria:

26 (1) The person is engaged in the practice of

1 cardiorespiratory care and has the knowledge and skill
2 necessary to administer respiratory care.

3 (2) The person is capable of serving as a resource to
4 the licensed health care professional in relation to the
5 technical aspects of cardiorespiratory care and the safe
6 and effective methods for administering cardiorespiratory
7 care modalities.

8 (3) The person is able to function in situations of
9 unsupervised patient contact requiring great individual
10 judgment.

11 (Source: P.A. 94-523, eff. 1-1-06.)

12 Section 150. The Barber, Cosmetology, Esthetics, and Nail
13 Technology Act of 1985 is amended by changing Section 1-11 as
14 follows:

15 (225 ILCS 410/1-11) (from Ch. 111, par. 1701-11)

16 (Section scheduled to be repealed on January 1, 2016)

17 Sec. 1-11. Exceptions to Act.

18 (a) Nothing in this Act shall be construed to apply to the
19 educational activities conducted in connection with any
20 monthly, annual or other special educational program of any
21 bona fide association of licensed cosmetologists,
22 estheticians, nail technicians, or barbers, or licensed
23 cosmetology, esthetics, nail technology, or barber schools
24 from which the general public is excluded.

1 (b) Nothing in this Act shall be construed to apply to the
2 activities and services of registered nurses or licensed
3 practical nurses, as defined in the Nurse Practice Act ~~Nursing~~
4 ~~and Advanced Practice Nursing Act~~, or to personal care or
5 health care services provided by individuals in the performance
6 of their duties as employed or authorized by facilities or
7 programs licensed or certified by State agencies. As used in
8 this subsection (b), "personal care" means assistance with
9 meals, dressing, movement, bathing, or other personal needs or
10 maintenance or general supervision and oversight of the
11 physical and mental well-being of an individual who is
12 incapable of maintaining a private, independent residence or
13 who is incapable of managing his or her person whether or not a
14 guardian has been appointed for that individual. The definition
15 of "personal care" as used in this subsection (b) shall not
16 otherwise be construed to negate the requirements of this Act
17 or its rules.

18 (c) Nothing in this Act shall be deemed to require
19 licensure of individuals employed by the motion picture, film,
20 television, stage play or related industry for the purpose of
21 providing cosmetology or esthetics services to actors of that
22 industry while engaged in the practice of cosmetology or
23 esthetics as a part of that person's employment.

24 (Source: P.A. 90-580, eff. 5-21-98; 90-742, eff. 8-13-98;
25 91-357, eff. 7-29-99.)

1 Section 155. The Nurse Agency Licensing Act is amended by
2 changing Section 3 as follows:

3 (225 ILCS 510/3) (from Ch. 111, par. 953)

4 Sec. 3. Definitions. As used in this Act:

5 (a) "Certified nurse aide" means an individual certified as
6 defined in Section 3-206 of the Nursing Home Care Act, as now
7 or hereafter amended.

8 (b) "Department" means the Department of Labor.

9 (c) "Director" means the Director of Labor.

10 (d) "Health care facility" is defined as in Section 3 of
11 the Illinois Health Facilities Planning Act, as now or
12 hereafter amended.

13 (e) "Licensee" means any nursing agency which is properly
14 licensed under this Act.

15 (f) "Nurse" means a registered nurse or a licensed
16 practical nurse as defined in the Nurse Practice Act ~~Nursing~~
17 ~~and Advanced Practice Nursing Act.~~

18 (g) "Nurse agency" means any individual, firm,
19 corporation, partnership or other legal entity that employs,
20 assigns or refers nurses or certified nurse aides to a health
21 care facility for a fee. The term "nurse agency" includes
22 nurses registries. The term "nurse agency" does not include
23 services provided by home health agencies licensed and operated
24 under the Home Health, Home Services, and Home Nursing Agency
25 Licensing Act or a licensed or certified individual who

1 provides his or her own services as a regular employee of a
2 health care facility, nor does it apply to a health care
3 facility's organizing nonsalaried employees to provide
4 services only in that facility.

5 (Source: P.A. 94-379, eff. 1-1-06.)

6 Section 160. The Illinois Public Aid Code is amended by
7 changing Section 8A-7.1 as follows:

8 (305 ILCS 5/8A-7.1) (from Ch. 23, par. 8A-7.1)

9 Sec. 8A-7.1. The Director, upon making a determination
10 based upon information in the possession of the Illinois
11 Department, that continuation in practice of a licensed health
12 care professional would constitute an immediate danger to the
13 public, shall submit a written communication to the Director of
14 Professional Regulation indicating such determination and
15 additionally providing a complete summary of the information
16 upon which such determination is based, and recommending that
17 the Director of Professional Regulation immediately suspend
18 such person's license. All relevant evidence, or copies
19 thereof, in the Illinois Department's possession may also be
20 submitted in conjunction with the written communication. A copy
21 of such written communication, which is exempt from the copying
22 and inspection provisions of the Freedom of Information Act,
23 shall at the time of submittal to the Director of Professional
24 Regulation be simultaneously mailed to the last known business

1 address of such licensed health care professional by certified
2 or registered postage, United States Mail, return receipt
3 requested. Any evidence, or copies thereof, which is submitted
4 in conjunction with the written communication is also exempt
5 from the copying and inspection provisions of the Freedom of
6 Information Act.

7 The Director, upon making a determination based upon
8 information in the possession of the Illinois Department, that
9 a licensed health care professional is willfully committing
10 fraud upon the Illinois Department's medical assistance
11 program, shall submit a written communication to the Director
12 of Professional Regulation indicating such determination and
13 additionally providing a complete summary of the information
14 upon which such determination is based. All relevant evidence,
15 or copies thereof, in the Illinois Department's possession may
16 also be submitted in conjunction with the written
17 communication.

18 Upon receipt of such written communication, the Director of
19 Professional Regulation shall promptly investigate the
20 allegations contained in such written communication. A copy of
21 such written communication, which is exempt from the copying
22 and inspection provisions of the Freedom of Information Act,
23 shall at the time of submission to the Director of Professional
24 Regulation, be simultaneously mailed to the last known address
25 of such licensed health care professional by certified or
26 registered postage, United States Mail, return receipt

1 requested. Any evidence, or copies thereof, which is submitted
2 in conjunction with the written communication is also exempt
3 from the copying and inspection provisions of the Freedom of
4 Information Act.

5 For the purposes of this Section, "licensed health care
6 professional" means any person licensed under the Illinois
7 Dental Practice Act, the Nurse Practice Act ~~Nursing and~~
8 ~~Advanced Practice Nursing Act~~, the Medical Practice Act of
9 1987, the Pharmacy Practice Act of 1987, the Podiatric Medical
10 Practice Act of 1987, or the Illinois Optometric Practice Act
11 of 1987.

12 (Source: P.A. 92-651, eff. 7-11-02.)

13 Section 165. The Elder Abuse and Neglect Act is amended by
14 changing Section 2 as follows:

15 (320 ILCS 20/2) (from Ch. 23, par. 6602)

16 Sec. 2. Definitions. As used in this Act, unless the
17 context requires otherwise:

18 (a) "Abuse" means causing any physical, mental or sexual
19 injury to an eligible adult, including exploitation of such
20 adult's financial resources.

21 Nothing in this Act shall be construed to mean that an
22 eligible adult is a victim of abuse, neglect, or self-neglect
23 for the sole reason that he or she is being furnished with or
24 relies upon treatment by spiritual means through prayer alone,

1 in accordance with the tenets and practices of a recognized
2 church or religious denomination.

3 Nothing in this Act shall be construed to mean that an
4 eligible adult is a victim of abuse because of health care
5 services provided or not provided by licensed health care
6 professionals.

7 (a-5) "Abuser" means a person who abuses, neglects, or
8 financially exploits an eligible adult.

9 (a-7) "Caregiver" means a person who either as a result of
10 a family relationship, voluntarily, or in exchange for
11 compensation has assumed responsibility for all or a portion of
12 the care of an eligible adult who needs assistance with
13 activities of daily living.

14 (b) "Department" means the Department on Aging of the State
15 of Illinois.

16 (c) "Director" means the Director of the Department.

17 (d) "Domestic living situation" means a residence where the
18 eligible adult lives alone or with his or her family or a
19 caregiver, or others, or a board and care home or other
20 community-based unlicensed facility, but is not:

21 (1) A licensed facility as defined in Section 1-113 of
22 the Nursing Home Care Act;

23 (2) A "life care facility" as defined in the Life Care
24 Facilities Act;

25 (3) A home, institution, or other place operated by the
26 federal government or agency thereof or by the State of

1 Illinois;

2 (4) A hospital, sanitarium, or other institution, the
3 principal activity or business of which is the diagnosis,
4 care, and treatment of human illness through the
5 maintenance and operation of organized facilities
6 therefor, which is required to be licensed under the
7 Hospital Licensing Act;

8 (5) A "community living facility" as defined in the
9 Community Living Facilities Licensing Act;

10 (6) A "community residential alternative" as defined
11 in the Community Residential Alternatives Licensing Act;

12 (7) A "community-integrated living arrangement" as
13 defined in the Community-Integrated Living Arrangements
14 Licensure and Certification Act;

15 (8) An assisted living or shared housing establishment
16 as defined in the Assisted Living and Shared Housing Act;
17 or

18 (9) A supportive living facility as described in
19 Section 5-5.01a of the Illinois Public Aid Code.

20 (e) "Eligible adult" means a person 60 years of age or
21 older who resides in a domestic living situation and is, or is
22 alleged to be, abused, neglected, or financially exploited by
23 another individual or who neglects himself or herself.

24 (f) "Emergency" means a situation in which an eligible
25 adult is living in conditions presenting a risk of death or
26 physical, mental or sexual injury and the provider agency has

1 reason to believe the eligible adult is unable to consent to
2 services which would alleviate that risk.

3 (f-5) "Mandated reporter" means any of the following
4 persons while engaged in carrying out their professional
5 duties:

6 (1) a professional or professional's delegate while
7 engaged in: (i) social services, (ii) law enforcement,
8 (iii) education, (iv) the care of an eligible adult or
9 eligible adults, or (v) any of the occupations required to
10 be licensed under the Clinical Psychologist Licensing Act,
11 the Clinical Social Work and Social Work Practice Act, the
12 Illinois Dental Practice Act, the Dietetic and Nutrition
13 Services Practice Act, the Marriage and Family Therapy
14 Licensing Act, the Medical Practice Act of 1987, the
15 Naprapathic Practice Act, the Nurse Practice Act ~~Nursing~~
16 ~~and Advanced Practice Nursing Act~~, the Nursing Home
17 Administrators Licensing and Disciplinary Act, the
18 Illinois Occupational Therapy Practice Act, the Illinois
19 Optometric Practice Act of 1987, the Pharmacy Practice Act
20 of 1987, the Illinois Physical Therapy Act, the Physician
21 Assistant Practice Act of 1987, the Podiatric Medical
22 Practice Act of 1987, the Respiratory Care Practice Act,
23 the Professional Counselor and Clinical Professional
24 Counselor Licensing Act, the Illinois Speech-Language
25 Pathology and Audiology Practice Act, the Veterinary
26 Medicine and Surgery Practice Act of 2004, and the Illinois

1 Public Accounting Act;

2 (2) an employee of a vocational rehabilitation
3 facility prescribed or supervised by the Department of
4 Human Services;

5 (3) an administrator, employee, or person providing
6 services in or through an unlicensed community based
7 facility;

8 (4) any religious practitioner who provides treatment
9 by prayer or spiritual means alone in accordance with the
10 tenets and practices of a recognized church or religious
11 denomination, except as to information received in any
12 confession or sacred communication enjoined by the
13 discipline of the religious denomination to be held
14 confidential;

15 (5) field personnel of the Department of Healthcare and
16 Family Services, Department of Public Health, and
17 Department of Human Services, and any county or municipal
18 health department;

19 (6) personnel of the Department of Human Services, the
20 Guardianship and Advocacy Commission, the State Fire
21 Marshal, local fire departments, the Department on Aging
22 and its subsidiary Area Agencies on Aging and provider
23 agencies, and the Office of State Long Term Care Ombudsman;

24 (7) any employee of the State of Illinois not otherwise
25 specified herein who is involved in providing services to
26 eligible adults, including professionals providing medical

1 or rehabilitation services and all other persons having
2 direct contact with eligible adults;

3 (8) a person who performs the duties of a coroner or
4 medical examiner; or

5 (9) a person who performs the duties of a paramedic or
6 an emergency medical technician.

7 (g) "Neglect" means another individual's failure to
8 provide an eligible adult with or willful withholding from an
9 eligible adult the necessities of life including, but not
10 limited to, food, clothing, shelter or health care. This
11 subsection does not create any new affirmative duty to provide
12 support to eligible adults. Nothing in this Act shall be
13 construed to mean that an eligible adult is a victim of neglect
14 because of health care services provided or not provided by
15 licensed health care professionals.

16 (h) "Provider agency" means any public or nonprofit agency
17 in a planning and service area appointed by the regional
18 administrative agency with prior approval by the Department on
19 Aging to receive and assess reports of alleged or suspected
20 abuse, neglect, or financial exploitation.

21 (i) "Regional administrative agency" means any public or
22 nonprofit agency in a planning and service area so designated
23 by the Department, provided that the designated Area Agency on
24 Aging shall be designated the regional administrative agency if
25 it so requests. The Department shall assume the functions of
26 the regional administrative agency for any planning and service

1 area where another agency is not so designated.

2 (i-5) "Self-neglect" means a condition that is the result
3 of an eligible adult's inability, due to physical or mental
4 impairments, or both, or a diminished capacity, to perform
5 essential self-care tasks that substantially threaten his or
6 her own health, including: providing essential food, clothing,
7 shelter, and health care; and obtaining goods and services
8 necessary to maintain physical health, mental health,
9 emotional well-being, and general safety.

10 (j) "Substantiated case" means a reported case of alleged
11 or suspected abuse, neglect, financial exploitation, or
12 self-neglect in which a provider agency, after assessment,
13 determines that there is reason to believe abuse, neglect, or
14 financial exploitation has occurred.

15 (Source: P.A. 93-281 eff. 12-31-03; 93-300, eff. 1-1-04;
16 94-1064, eff. 1-1-07.)

17 Section 170. The Prenatal and Newborn Care Act is amended
18 by changing Section 2 as follows:

19 (410 ILCS 225/2) (from Ch. 111 1/2, par. 7022)

20 Sec. 2. Definitions. As used in this Act, unless the
21 context otherwise requires:

22 "Advanced practice nurse" or "APN" means an advanced
23 practice nurse licensed under the Nurse Practice Act ~~Nursing~~
24 ~~and Advanced Practice Nursing Act~~ who has a written

1 collaborative agreement with a collaborating physician that
2 authorizes the provision of prenatal and newborn care.

3 "Department" means the Illinois Department of Human
4 Services.

5 "Early and Periodic Screening, Diagnosis and Treatment
6 (EPSDT)" means the provision of preventative health care under
7 42 C.F.R. 441.50 et seq., including medical and dental
8 services, needed to assess growth and development and detect
9 and treat health problems.

10 "Hospital" means a hospital as defined under the Hospital
11 Licensing Act.

12 "Local health authority" means the full-time official
13 health department or board of health, as recognized by the
14 Illinois Department of Public Health, having jurisdiction over
15 a particular area.

16 "Nurse" means a nurse licensed under the Nurse Practice Act
17 ~~Nursing and Advanced Practice Nursing Act.~~

18 "Physician" means a physician licensed to practice
19 medicine in all of its branches.

20 "Physician assistant" means a physician assistant licensed
21 under the Physician Assistant Practice Act of 1987 who has been
22 delegated authority to provide prenatal and newborn care.

23 "Postnatal visit" means a visit occurring after birth, with
24 reference to the newborn.

25 "Prenatal visit" means a visit occurring before birth.

26 "Program" means the Prenatal and Newborn Care Program

1 established pursuant to this Act.

2 (Source: P.A. 93-962, eff. 8-20-04.)

3 Section 175. The Illinois Sexually Transmissible Disease
4 Control Act is amended by changing Section 4 as follows:

5 (410 ILCS 325/4) (from Ch. 111 1/2, par. 7404)

6 Sec. 4. Reporting required.

7 (a) A physician licensed under the provisions of the
8 Medical Practice Act of 1987, an advanced practice nurse
9 licensed under the provisions of the Nurse Practice Act ~~Nursing~~
10 ~~and Advanced Practice Nursing Act~~ who has a written
11 collaborative agreement with a collaborating physician that
12 authorizes the provision of services for a sexually
13 transmissible disease, or a physician assistant licensed under
14 the provisions of the Physician Assistant Practice Act of 1987
15 who has been delegated authority to provide services for a
16 sexually transmissible disease who makes a diagnosis of or
17 treats a person with a sexually transmissible disease and each
18 laboratory that performs a test for a sexually transmissible
19 disease which concludes with a positive result shall report
20 such facts as may be required by the Department by rule, within
21 such time period as the Department may require by rule, but in
22 no case to exceed 2 weeks.

23 (b) The Department shall adopt rules specifying the
24 information required in reporting a sexually transmissible

1 disease, the method of reporting and specifying a minimum time
2 period for reporting. In adopting such rules, the Department
3 shall consider the need for information, protections for the
4 privacy and confidentiality of the patient, and the practical
5 abilities of persons and laboratories to report in a reasonable
6 fashion.

7 (c) Any person who knowingly or maliciously disseminates
8 any false information or report concerning the existence of any
9 sexually transmissible disease under this Section is guilty of
10 a Class A misdemeanor.

11 (d) Any person who violates the provisions of this Section
12 or the rules adopted hereunder may be fined by the Department
13 up to \$500 for each violation. The Department shall report each
14 violation of this Section to the regulatory agency responsible
15 for licensing a health care professional or a laboratory to
16 which these provisions apply.

17 (Source: P.A. 93-962, eff. 8-20-04.)

18 Section 180. The Home Health and Hospice Drug Dispensation
19 and Administration Act is amended by changing Section 10 as
20 follows:

21 (410 ILCS 642/10)

22 Sec. 10. Definitions. In this Act:

23 "Authorized nursing employee" means a registered nurse or
24 advanced practice nurse, as defined in the Nurse Practice Act

1 ~~Nursing and Advanced Practice Nursing Act~~, who is employed by a
2 home health agency or hospice licensed in this State.

3 "Health care professional" means a physician licensed to
4 practice medicine in all its branches, an advanced practice
5 nurse who has a written collaborative agreement with a
6 collaborating physician that authorizes services under this
7 Act, or a physician assistant who has been delegated the
8 authority to perform services under this Act by his or her
9 supervising physician.

10 "Home health agency" has the meaning ascribed to it in
11 Section 2.04 of the Home Health, Home Services, and Home
12 Nursing Agency Licensing Act.

13 "Hospice" means a full hospice, as defined in Section 3 of
14 the Hospice Program Licensing Act.

15 "Physician" means a physician licensed under the Medical
16 Practice Act of 1987 to practice medicine in all its branches.

17 (Source: P.A. 94-638, eff. 8-22-05; revised 10-19-06.)

18 Section 190. The Illinois Abortion Law of 1975 is amended
19 by changing Section 11 as follows:

20 (720 ILCS 510/11) (from Ch. 38, par. 81-31)

21 Sec. 11. (1) Any person who intentionally violates any
22 provision of this Law commits a Class A misdemeanor unless a
23 specific penalty is otherwise provided. Any person who
24 intentionally falsifies any writing required by this Law

1 commits a Class A misdemeanor.

2 Intentional, knowing, reckless, or negligent violations of
3 this Law shall constitute unprofessional conduct which causes
4 public harm under Section 22 of the Medical Practice Act of
5 1987, as amended; Sections 70-5 of the Nurse Practice Act
6 ~~Sections 10-45 and 15-50 of the Nursing and Advanced Practice~~
7 ~~Nursing Act~~, and Section 21 of the Physician Assistant Practice
8 Act of 1987, as amended.

9 Intentional, knowing, reckless or negligent violations of
10 this Law will constitute grounds for refusal, denial,
11 revocation, suspension, or withdrawal of license, certificate,
12 or permit under Section 30 of the Pharmacy Practice Act of
13 1987, as amended; Section 7 of the Ambulatory Surgical
14 Treatment Center Act, effective July 19, 1973, as amended; and
15 Section 7 of the Hospital Licensing Act.

16 (2) Any hospital or licensed facility which, or any
17 physician who intentionally, knowingly, or recklessly fails to
18 submit a complete report to the Department in accordance with
19 the provisions of Section 10 of this Law and any person who
20 intentionally, knowingly, recklessly or negligently fails to
21 maintain the confidentiality of any reports required under this
22 Law or reports required by Sections 10.1 or 12 of this Law
23 commits a Class B misdemeanor.

24 (3) Any person who sells any drug, medicine, instrument or
25 other substance which he knows to be an abortifacient and which
26 is in fact an abortifacient, unless upon prescription of a

1 physician, is guilty of a Class B misdemeanor. Any person who
2 prescribes or administers any instrument, medicine, drug or
3 other substance or device, which he knows to be an
4 abortifacient, and which is in fact an abortifacient, and
5 intentionally, knowingly or recklessly fails to inform the
6 person for whom it is prescribed or upon whom it is
7 administered that it is an abortifacient commits a Class C
8 misdemeanor.

9 (4) Any person who intentionally, knowingly or recklessly
10 performs upon a woman what he represents to that woman to be an
11 abortion when he knows or should know that she is not pregnant
12 commits a Class 2 felony and shall be answerable in civil
13 damages equal to 3 times the amount of proved damages.

14 (Source: P.A. 90-742, eff. 8-13-98.)

15 Section 195. The Illinois Controlled Substances Act is
16 amended by changing Sections 102, 103, and 303.05 as follows:

17 (720 ILCS 570/102) (from Ch. 56 1/2, par. 1102)

18 Sec. 102. Definitions. As used in this Act, unless the
19 context otherwise requires:

20 (a) "Addict" means any person who habitually uses any drug,
21 chemical, substance or dangerous drug other than alcohol so as
22 to endanger the public morals, health, safety or welfare or who
23 is so far addicted to the use of a dangerous drug or controlled
24 substance other than alcohol as to have lost the power of self

1 control with reference to his addiction.

2 (b) "Administer" means the direct application of a
3 controlled substance, whether by injection, inhalation,
4 ingestion, or any other means, to the body of a patient,
5 research subject, or animal (as defined by the Humane
6 Euthanasia in Animal Shelters Act) by:

7 (1) a practitioner (or, in his presence, by his
8 authorized agent),

9 (2) the patient or research subject at the lawful
10 direction of the practitioner, or

11 (3) a euthanasia technician as defined by the Humane
12 Euthanasia in Animal Shelters Act.

13 (c) "Agent" means an authorized person who acts on behalf
14 of or at the direction of a manufacturer, distributor, or
15 dispenser. It does not include a common or contract carrier,
16 public warehouseman or employee of the carrier or warehouseman.

17 (c-1) "Anabolic Steroids" means any drug or hormonal
18 substance, chemically and pharmacologically related to
19 testosterone (other than estrogens, progestins, and
20 corticosteroids) that promotes muscle growth, and includes:

21 (i) boldenone,

22 (ii) chlorotestosterone,

23 (iii) chostebol,

24 (iv) dehydrochlormethyltestosterone,

25 (v) dihydrotestosterone,

26 (vi) drostanolone,

1 (vii) ethylestrenol,
2 (viii) fluoxymesterone,
3 (ix) formebulone,
4 (x) mesterolone,
5 (xi) methandienone,
6 (xii) methandranone,
7 (xiii) methandriol,
8 (xiv) methandrostenolone,
9 (xv) methenolone,
10 (xvi) methyltestosterone,
11 (xvii) mibolerone,
12 (xviii) nandrolone,
13 (xix) norethandrolone,
14 (xx) oxandrolone,
15 (xxi) oxymesterone,
16 (xxii) oxymetholone,
17 (xxiii) stanolone,
18 (xxiv) stanozolol,
19 (xxv) testolactone,
20 (xxvi) testosterone,
21 (xxvii) trenbolone, and
22 (xxviii) any salt, ester, or isomer of a drug or
23 substance described or listed in this paragraph, if
24 that salt, ester, or isomer promotes muscle growth.

25 Any person who is otherwise lawfully in possession of an
26 anabolic steroid, or who otherwise lawfully manufactures,

1 distributes, dispenses, delivers, or possesses with intent to
2 deliver an anabolic steroid, which anabolic steroid is
3 expressly intended for and lawfully allowed to be administered
4 through implants to livestock or other nonhuman species, and
5 which is approved by the Secretary of Health and Human Services
6 for such administration, and which the person intends to
7 administer or have administered through such implants, shall
8 not be considered to be in unauthorized possession or to
9 unlawfully manufacture, distribute, dispense, deliver, or
10 possess with intent to deliver such anabolic steroid for
11 purposes of this Act.

12 (d) "Administration" means the Drug Enforcement
13 Administration, United States Department of Justice, or its
14 successor agency.

15 (e) "Control" means to add a drug or other substance, or
16 immediate precursor, to a Schedule under Article II of this Act
17 whether by transfer from another Schedule or otherwise.

18 (f) "Controlled Substance" means a drug, substance, or
19 immediate precursor in the Schedules of Article II of this Act.

20 (g) "Counterfeit substance" means a controlled substance,
21 which, or the container or labeling of which, without
22 authorization bears the trademark, trade name, or other
23 identifying mark, imprint, number or device, or any likeness
24 thereof, of a manufacturer, distributor, or dispenser other
25 than the person who in fact manufactured, distributed, or
26 dispensed the substance.

1 (h) "Deliver" or "delivery" means the actual, constructive
2 or attempted transfer of possession of a controlled substance,
3 with or without consideration, whether or not there is an
4 agency relationship.

5 (i) "Department" means the Illinois Department of Human
6 Services (as successor to the Department of Alcoholism and
7 Substance Abuse) or its successor agency.

8 (j) "Department of State Police" means the Department of
9 State Police of the State of Illinois or its successor agency.

10 (k) "Department of Corrections" means the Department of
11 Corrections of the State of Illinois or its successor agency.

12 (l) "Department of Professional Regulation" means the
13 Department of Professional Regulation of the State of Illinois
14 or its successor agency.

15 (m) "Depressant" or "stimulant substance" means:

16 (1) a drug which contains any quantity of (i)
17 barbituric acid or any of the salts of barbituric acid
18 which has been designated as habit forming under section
19 502 (d) of the Federal Food, Drug, and Cosmetic Act (21
20 U.S.C. 352 (d)); or

21 (2) a drug which contains any quantity of (i)
22 amphetamine or methamphetamine and any of their optical
23 isomers; (ii) any salt of amphetamine or methamphetamine or
24 any salt of an optical isomer of amphetamine; or (iii) any
25 substance which the Department, after investigation, has
26 found to be, and by rule designated as, habit forming

1 because of its depressant or stimulant effect on the
2 central nervous system; or

3 (3) lysergic acid diethylamide; or

4 (4) any drug which contains any quantity of a substance
5 which the Department, after investigation, has found to
6 have, and by rule designated as having, a potential for
7 abuse because of its depressant or stimulant effect on the
8 central nervous system or its hallucinogenic effect.

9 (n) (Blank).

10 (o) "Director" means the Director of the Department of
11 State Police or the Department of Professional Regulation or
12 his designated agents.

13 (p) "Dispense" means to deliver a controlled substance to
14 an ultimate user or research subject by or pursuant to the
15 lawful order of a prescriber, including the prescribing,
16 administering, packaging, labeling, or compounding necessary
17 to prepare the substance for that delivery.

18 (q) "Dispenser" means a practitioner who dispenses.

19 (r) "Distribute" means to deliver, other than by
20 administering or dispensing, a controlled substance.

21 (s) "Distributor" means a person who distributes.

22 (t) "Drug" means (1) substances recognized as drugs in the
23 official United States Pharmacopoeia, Official Homeopathic
24 Pharmacopoeia of the United States, or official National
25 Formulary, or any supplement to any of them; (2) substances
26 intended for use in diagnosis, cure, mitigation, treatment, or

1 prevention of disease in man or animals; (3) substances (other
2 than food) intended to affect the structure of any function of
3 the body of man or animals and (4) substances intended for use
4 as a component of any article specified in clause (1), (2), or
5 (3) of this subsection. It does not include devices or their
6 components, parts, or accessories.

7 (t-5) "Euthanasia agency" means an entity certified by the
8 Department of Professional Regulation for the purpose of animal
9 euthanasia that holds an animal control facility license or
10 animal shelter license under the Animal Welfare Act. A
11 euthanasia agency is authorized to purchase, store, possess,
12 and utilize Schedule II nonnarcotic and Schedule III
13 nonnarcotic drugs for the sole purpose of animal euthanasia.

14 (t-10) "Euthanasia drugs" means Schedule II or Schedule III
15 substances (nonnarcotic controlled substances) that are used
16 by a euthanasia agency for the purpose of animal euthanasia.

17 (u) "Good faith" means the prescribing or dispensing of a
18 controlled substance by a practitioner in the regular course of
19 professional treatment to or for any person who is under his
20 treatment for a pathology or condition other than that
21 individual's physical or psychological dependence upon or
22 addiction to a controlled substance, except as provided herein:
23 and application of the term to a pharmacist shall mean the
24 dispensing of a controlled substance pursuant to the
25 prescriber's order which in the professional judgment of the
26 pharmacist is lawful. The pharmacist shall be guided by

1 accepted professional standards including, but not limited to
2 the following, in making the judgment:

3 (1) lack of consistency of doctor-patient
4 relationship,

5 (2) frequency of prescriptions for same drug by one
6 prescriber for large numbers of patients,

7 (3) quantities beyond those normally prescribed,

8 (4) unusual dosages,

9 (5) unusual geographic distances between patient,
10 pharmacist and prescriber,

11 (6) consistent prescribing of habit-forming drugs.

12 (u-1) "Home infusion services" means services provided by a
13 pharmacy in compounding solutions for direct administration to
14 a patient in a private residence, long-term care facility, or
15 hospice setting by means of parenteral, intravenous,
16 intramuscular, subcutaneous, or intraspinal infusion.

17 (v) "Immediate precursor" means a substance:

18 (1) which the Department has found to be and by rule
19 designated as being a principal compound used, or produced
20 primarily for use, in the manufacture of a controlled
21 substance;

22 (2) which is an immediate chemical intermediary used or
23 likely to be used in the manufacture of such controlled
24 substance; and

25 (3) the control of which is necessary to prevent,
26 curtail or limit the manufacture of such controlled

1 substance.

2 (w) "Instructional activities" means the acts of teaching,
3 educating or instructing by practitioners using controlled
4 substances within educational facilities approved by the State
5 Board of Education or its successor agency.

6 (x) "Local authorities" means a duly organized State,
7 County or Municipal peace unit or police force.

8 (y) "Look-alike substance" means a substance, other than a
9 controlled substance which (1) by overall dosage unit
10 appearance, including shape, color, size, markings or lack
11 thereof, taste, consistency, or any other identifying physical
12 characteristic of the substance, would lead a reasonable person
13 to believe that the substance is a controlled substance, or (2)
14 is expressly or impliedly represented to be a controlled
15 substance or is distributed under circumstances which would
16 lead a reasonable person to believe that the substance is a
17 controlled substance. For the purpose of determining whether
18 the representations made or the circumstances of the
19 distribution would lead a reasonable person to believe the
20 substance to be a controlled substance under this clause (2) of
21 subsection (y), the court or other authority may consider the
22 following factors in addition to any other factor that may be
23 relevant:

24 (a) statements made by the owner or person in control
25 of the substance concerning its nature, use or effect;

26 (b) statements made to the buyer or recipient that the

1 substance may be resold for profit;

2 (c) whether the substance is packaged in a manner
3 normally used for the illegal distribution of controlled
4 substances;

5 (d) whether the distribution or attempted distribution
6 included an exchange of or demand for money or other
7 property as consideration, and whether the amount of the
8 consideration was substantially greater than the
9 reasonable retail market value of the substance.

10 Clause (1) of this subsection (y) shall not apply to a
11 noncontrolled substance in its finished dosage form that was
12 initially introduced into commerce prior to the initial
13 introduction into commerce of a controlled substance in its
14 finished dosage form which it may substantially resemble.

15 Nothing in this subsection (y) prohibits the dispensing or
16 distributing of noncontrolled substances by persons authorized
17 to dispense and distribute controlled substances under this
18 Act, provided that such action would be deemed to be carried
19 out in good faith under subsection (u) if the substances
20 involved were controlled substances.

21 Nothing in this subsection (y) or in this Act prohibits the
22 manufacture, preparation, propagation, compounding,
23 processing, packaging, advertising or distribution of a drug or
24 drugs by any person registered pursuant to Section 510 of the
25 Federal Food, Drug, and Cosmetic Act (21 U.S.C. 360).

26 (y-1) "Mail-order pharmacy" means a pharmacy that is

1 located in a state of the United States, other than Illinois,
2 that delivers, dispenses or distributes, through the United
3 States Postal Service or other common carrier, to Illinois
4 residents, any substance which requires a prescription.

5 (z) "Manufacture" means the production, preparation,
6 propagation, compounding, conversion or processing of a
7 controlled substance other than methamphetamine, either
8 directly or indirectly, by extraction from substances of
9 natural origin, or independently by means of chemical
10 synthesis, or by a combination of extraction and chemical
11 synthesis, and includes any packaging or repackaging of the
12 substance or labeling of its container, except that this term
13 does not include:

14 (1) by an ultimate user, the preparation or compounding
15 of a controlled substance for his own use; or

16 (2) by a practitioner, or his authorized agent under
17 his supervision, the preparation, compounding, packaging,
18 or labeling of a controlled substance:

19 (a) as an incident to his administering or
20 dispensing of a controlled substance in the course of
21 his professional practice; or

22 (b) as an incident to lawful research, teaching or
23 chemical analysis and not for sale.

24 (z-1) (Blank).

25 (aa) "Narcotic drug" means any of the following, whether
26 produced directly or indirectly by extraction from substances

1 of natural origin, or independently by means of chemical
2 synthesis, or by a combination of extraction and chemical
3 synthesis:

4 (1) opium and opiate, and any salt, compound,
5 derivative, or preparation of opium or opiate;

6 (2) any salt, compound, isomer, derivative, or
7 preparation thereof which is chemically equivalent or
8 identical with any of the substances referred to in clause
9 (1), but not including the isoquinoline alkaloids of opium;

10 (3) opium poppy and poppy straw;

11 (4) coca leaves and any salts, compound, isomer, salt
12 of an isomer, derivative, or preparation of coca leaves
13 including cocaine or ecgonine, and any salt, compound,
14 isomer, derivative, or preparation thereof which is
15 chemically equivalent or identical with any of these
16 substances, but not including decocainized coca leaves or
17 extractions of coca leaves which do not contain cocaine or
18 ecgonine (for the purpose of this paragraph, the term
19 "isomer" includes optical, positional and geometric
20 isomers).

21 (bb) "Nurse" means a registered nurse licensed under the
22 Nurse Practice Act ~~Nursing and Advanced Practice Nursing Act.~~

23 (cc) (Blank).

24 (dd) "Opiate" means any substance having an addiction
25 forming or addiction sustaining liability similar to morphine
26 or being capable of conversion into a drug having addiction

1 forming or addiction sustaining liability.

2 (ee) "Opium poppy" means the plant of the species *Papaver*
3 *somniferum* L., except its seeds.

4 (ff) "Parole and Pardon Board" means the Parole and Pardon
5 Board of the State of Illinois or its successor agency.

6 (gg) "Person" means any individual, corporation,
7 mail-order pharmacy, government or governmental subdivision or
8 agency, business trust, estate, trust, partnership or
9 association, or any other entity.

10 (hh) "Pharmacist" means any person who holds a certificate
11 of registration as a registered pharmacist, a local registered
12 pharmacist or a registered assistant pharmacist under the
13 Pharmacy Practice Act of 1987.

14 (ii) "Pharmacy" means any store, ship or other place in
15 which pharmacy is authorized to be practiced under the Pharmacy
16 Practice Act of 1987.

17 (jj) "Poppy straw" means all parts, except the seeds, of
18 the opium poppy, after mowing.

19 (kk) "Practitioner" means a physician licensed to practice
20 medicine in all its branches, dentist, podiatrist,
21 veterinarian, scientific investigator, pharmacist, physician
22 assistant, advanced practice nurse, licensed practical nurse,
23 registered nurse, hospital, laboratory, or pharmacy, or other
24 person licensed, registered, or otherwise lawfully permitted
25 by the United States or this State to distribute, dispense,
26 conduct research with respect to, administer or use in teaching

1 or chemical analysis, a controlled substance in the course of
2 professional practice or research.

3 (ll) "Pre-printed prescription" means a written
4 prescription upon which the designated drug has been indicated
5 prior to the time of issuance.

6 (mm) "Prescriber" means a physician licensed to practice
7 medicine in all its branches, dentist, podiatrist or
8 veterinarian who issues a prescription, a physician assistant
9 who issues a prescription for a Schedule III, IV, or V
10 controlled substance in accordance with Section 303.05 and the
11 written guidelines required under Section 7.5 of the Physician
12 Assistant Practice Act of 1987, or an advanced practice nurse
13 with prescriptive authority delegated under Section 65-40 of
14 the Nurse Practice Act and in accordance with Section 303.05
15 and a written collaborative agreement under Section 65-35 of
16 the Nurse Practice Act ~~Sections 15-15 and 15-20 of the Nursing~~
17 ~~and Advanced Practice Nursing Act.~~

18 (nn) "Prescription" means a lawful written, facsimile, or
19 verbal order of a physician licensed to practice medicine in
20 all its branches, dentist, podiatrist or veterinarian for any
21 controlled substance, of a physician assistant for a Schedule
22 III, IV, or V controlled substance in accordance with Section
23 303.05 and the written guidelines required under Section 7.5 of
24 the Physician Assistant Practice Act of 1987, or of an advanced
25 practice nurse with prescriptive authority delegated under
26 Section 65-40 of the Nurse Practice Act who issues a

1 prescription for a Schedule III, IV, or V controlled substance
2 in accordance with Section 303.05 and a written collaborative
3 agreement under Section 65-35 of the Nurse Practice Act
4 ~~Sections 15-15 and 15-20 of the Nursing and Advanced Practice~~
5 ~~Nursing Act.~~

6 (oo) "Production" or "produce" means manufacture,
7 planting, cultivating, growing, or harvesting of a controlled
8 substance other than methamphetamine.

9 (pp) "Registrant" means every person who is required to
10 register under Section 302 of this Act.

11 (qq) "Registry number" means the number assigned to each
12 person authorized to handle controlled substances under the
13 laws of the United States and of this State.

14 (rr) "State" includes the State of Illinois and any state,
15 district, commonwealth, territory, insular possession thereof,
16 and any area subject to the legal authority of the United
17 States of America.

18 (ss) "Ultimate user" means a person who lawfully possesses
19 a controlled substance for his own use or for the use of a
20 member of his household or for administering to an animal owned
21 by him or by a member of his household.

22 (Source: P.A. 93-596, eff. 8-26-03; 93-626, eff. 12-23-03;
23 94-556, eff. 9-11-05.)

24 (720 ILCS 570/103) (from Ch. 56 1/2, par. 1103)

25 Sec. 103. Scope of Act. Nothing in this Act limits the

1 lawful authority granted by the Medical Practice Act of 1987,
2 the Nurse Practice Act ~~Nursing and Advanced Practice Nursing~~
3 ~~Act~~, or the Pharmacy Practice Act of 1987.

4 (Source: P.A. 90-742, eff. 8-13-98.)

5 (720 ILCS 570/303.05)

6 Sec. 303.05. Mid-level practitioner registration.

7 (a) The Department of Professional Regulation shall
8 register licensed physician assistants and licensed advanced
9 practice nurses to prescribe and dispense Schedule III, IV, or
10 V controlled substances under Section 303 and euthanasia
11 agencies to purchase, store, or administer euthanasia drugs
12 under the following circumstances:

13 (1) with respect to physician assistants or advanced
14 practice nurses,

15 (A) the physician assistant or advanced practice
16 nurse has been delegated prescriptive authority by a
17 physician licensed to practice medicine in all its
18 branches in accordance with Section 7.5 of the
19 Physician Assistant Practice Act of 1987 or Section
20 65-40 of the Nurse Practice Act ~~Section 15-20 of the~~
21 ~~Nursing and Advanced Practice Nursing Act~~; and

22 (B) the physician assistant or advanced practice
23 nurse has completed the appropriate application forms
24 and has paid the required fees as set by rule; or

25 (2) with respect to euthanasia agencies, the

1 euthanasia agency has obtained a license from the
2 Department of Professional Regulation and obtained a
3 registration number from the Department.

4 (b) The mid-level practitioner shall only be licensed to
5 prescribe those schedules of controlled substances for which a
6 licensed physician has delegated prescriptive authority,
7 except that a euthanasia agency does not have any prescriptive
8 authority.

9 (c) Upon completion of all registration requirements,
10 physician assistants, advanced practice nurses, and euthanasia
11 agencies shall be issued a mid-level practitioner controlled
12 substances license for Illinois.

13 (Source: P.A. 93-626, eff. 12-23-03.)

14 Section 200. The Methamphetamine Control and Community
15 Protection Act is amended by changing Section 110 as follows:

16 (720 ILCS 646/110)

17 Sec. 110. Scope of Act. Nothing in this Act limits any
18 authority or activity authorized by the Illinois Controlled
19 Substances Act, the Medical Practice Act of 1987, the Nurse
20 Practice Act ~~Nursing and Advanced Practice Nursing Act~~, the
21 Pharmacy Practice Act of 1987, the Illinois Dental Practice
22 Act, the Podiatric Medical Practice Act of 1987, or the
23 Veterinary Medicine and Surgery Practice Act of 2004. Nothing
24 in this Act limits the authority or activity of any law

1 enforcement officer acting within the scope of his or her
2 employment.

3 (Source: P.A. 94-556, eff. 9-11-05.)

4 Section 205. The Methamphetamine Precursor Control Act is
5 amended by changing Section 50 as follows:

6 (720 ILCS 648/50)

7 Sec. 50. Scope of Act.

8 (a) Nothing in this Act limits the scope, terms, or effect
9 of the Methamphetamine Control and Community Protection Act.

10 (b) Nothing in this Act limits the lawful authority granted
11 by the Medical Practice Act of 1987, the Nurse Practice Act
12 ~~Nursing and Advanced Practice Nursing Act~~, or the Pharmacy
13 Practice Act of 1987.

14 (c) Nothing in this Act limits the authority or activity of
15 any law enforcement officer acting within the scope of his or
16 her employment.

17 (Source: P.A. 94-694, eff. 1-15-06.)

18 Section 210. The Good Samaritan Act is amended by changing
19 Sections 34 and 40 as follows:

20 (745 ILCS 49/34)

21 Sec. 34. Advanced practice nurse; exemption from civil
22 liability for emergency care. A person licensed as an advanced

1 practice nurse under the Nurse Practice Act ~~Nursing and~~
2 ~~Advanced Practice Nursing Act~~ who in good faith provides
3 emergency care without fee to a person shall not be liable for
4 civil damages as a result of his or her acts or omissions,
5 except for willful or wanton misconduct on the part of the
6 person in providing the care.

7 (Source: P.A. 90-742, eff. 8-13-98.)

8 (745 ILCS 49/40)

9 Sec. 40. Nurses; exemption from civil liability for
10 services performed without compensation.

11 (a) No person licensed as a professional nurse or as a
12 practical nurse under the Nurse Practice Act ~~Nursing and~~
13 ~~Advanced Practice Nursing Act~~ who, without compensation,
14 renders nursing services shall be liable, and no cause of
15 action may be brought, for damages resulting from an act or
16 omission in rendering such services unless the act or omission
17 involved willful or wanton misconduct.

18 (b) (Blank).

19 (c) As used in this Section "entity" means a
20 proprietorship, partnership, association or corporation,
21 whether or not operated for profit.

22 (d) Nothing in this Section is intended to bar any cause of
23 action against an entity or change the liability of an entity
24 which arises out of an act or omission of any person exempt
25 from liability for negligence under this Section.

1 (Source: P.A. 89-607, eff. 1-1-97; 90-742, eff. 8-13-98.)

2 Section 220. The Unemployment Insurance Act is amended by
3 changing Section 230 as follows:

4 (820 ILCS 405/230) (from Ch. 48, par. 340)

5 Sec. 230. The term "employment" shall not include service
6 performed after 1971:

7 (A) In the employ of a hospital, if such service is
8 performed by a patient of the hospital.

9 (B) As a student nurse in the employ of a hospital or a
10 nurses' training school by an individual who is enrolled
11 and is regularly attending classes in a nurses' training
12 school approved pursuant to the Nurse Practice Act ~~Nursing~~
13 ~~and Advanced Practice Nursing Act.~~

14 (C) As an intern in the employ of a hospital by an
15 individual who has completed a 4 years' course in a medical
16 school chartered or approved pursuant to State law.

17 (Source: P.A. 90-742, eff. 8-13-98.)

18 (110 ILCS 915/Act rep.)

19 Section 225. The Baccalaureate Assistance Law for
20 Registered Nurses is repealed.

21 (225 ILCS 65/5-17 rep.)

22 (225 ILCS 65/15-5 rep.)

1 (225 ILCS 65/15-35 rep.)

2 (225 ILCS 65/15-50 rep.)

3 (225 ILCS 65/20-2 rep.)

4 (225 ILCS 65/20-5 rep.)

5 (225 ILCS 65/20-10 rep.)

6 (225 ILCS 65/20-15 rep.)

7 Section 230. The Nursing and Advanced Practice Nursing Act
8 is amended by repealing Sections 5-17, 15-5, 15-35, 15-50,
9 20-2, 20-5, 20-10, and 20-15.

10 Section 999. Effective date. This Act takes effect upon
11 becoming law.".